PHYSICIAN'S CERTIFICATE OF THE CAUSE OF DEATH.

Boston, Winthrop Jan. 5 1897.

Name and age of deceased: John H. Robbins *Age* 83 *yrs.* ..... *mos.* ..... *dys.*

Date and place of death: Jan. 5 '97 Absent St. Winthrop

Disease or cause of death: Exhaustion, from Pulmonary Edema and Mitral Disease, Paralysis and Age.

*Duration of disease:** Has been ill for most of the last year.

I certify that the above is true, to the best of my knowledge and belief.

Name and residence of physician. James L. Gillan M. D.
15 Princeton St.

* It is very desirable to be informed of the duration of the disease.

The office of the Board of Health will be open for the granting of permits for burial, as follows:—Saturdays, 9 A. M. till 2 P.M.; Sundays, 10 A.M. till 12 M.; Holidays, from 10 A.M. till 12 M.; other days, from 9 A.M till 5 P.M.

UNDERTAKER'S RETURN. ~~Boston.~~ Winthrop

Date of death, Jan. 5' 189 7. Name, John M. Robbins

Maiden name,* Sex, M.

Married, ~~single, or widow~~ of ~~wife of~~

Color, W. Age, 83 years, 3 mos., days. Residence, Almont St.

Place of death (street and number), Almont St. ward

Place of birth, Lancaster Mass. Occupation, Real Estate

Name of father, Joshua Maiden name of mother, Patty Manning

Birthplace of father, Athol Mass Birthplace of mother, Lancaster Mass.

Place of interment,† Forest Hills Cemt.

*If a married woman or a widow. † Give the name of the burial ground.

Signature of Undertaker: C. G. Brown.

Commonwealth of Massachusetts.

No. .....

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	January 9, 1897
2. Name, ...	Everett N. Floyd
(Maiden Name),* .	
(Name of Husband),*	
3. Sex, and whether single,	Male
Married, or Widowed,	Single
4. Color,†	White
5. Age, ...	1 Years, 7 Months, 11 Days.
6. Disease or Cause of Death, (Primary and Secondary),‡	Acute Bronchitis
Duration of Sickness, .	9 days
By whom certified, .	C. E. Johnson
7. Residence, ...	9 Pratt St.
8. Occupation, ...	At home
9. Place of Death, . . .	Winthrop
10. Place of Birth, . . .	Winthrop
11. Name of Father, . .	Nelson Floyd
12. Name of Mother, . . (Maiden Name),	Lizzie B. Floyd
13. Birthplace of Father, .	Winthrop
14. Birthplace of Mother, .	Winthrop
15. Place of Interment, .	Winthrop Cemetery
Signature of Undertaker ~~or other person~~ *making the Return*, ...	Sumner Floyd

DATED at Winthrop, on January 9 1897

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any [redacted] of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Everett Nelson Floyd *Age,* 1-7-27

Date and Place of Death,† - *died at* Ninth no 7 (Elmwood Ave) Jan 9" *189*7,

Disease or Cause of Death, - *of* Diphtheria
(Primary and Secondary.)‡

Duration of Sickness, - -

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, J. E. Johnson M.D.

Date of Certificate, Jan 9 *189*7.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. October, 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

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RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death,	Jan 15th 1897
2. Name,	Susan M. Dimock
(Maiden Name),*	Susan M. McNeill
(Name of Husband),*	Andrew Dimock
3. Sex, and whether single,	Female M
Married, or Widowed,	Married
4. Color,†	White
5. Age,	60 Years, ~~3~~ Months, 25 Days. ~~25~~
6. Disease or Cause of Death, (Primary and Secondary),‡	Dr O. K. Johnson
Duration of Sickness,	
By whom certified,	
7. Residence,	44 Winthrop Ave Winthrop
8. Occupation,	[redacted]
9. Place of Death,	Winthrop
10. Place of Birth,	Holderness N H
11. Name of Father,	William McNeill
12. Name of Mother, (Maiden Name),	Hannah C Batchelder
13. Birthplace of Father,	Newbury Mass.
14. Birthplace of Mother,	Northwood N H
15. Place of Interment,	Rem from Cemetary Lynn
Signature of Undertaker ~~or other person~~ making the Return,	Sumner Floyd

DATED at Winthrop, on Jan 10 th 1897

* If a Married Woman or Widow. † If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

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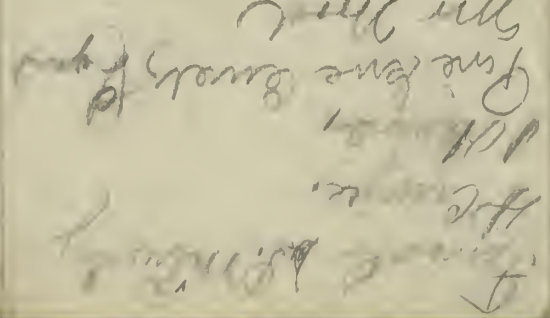
SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.



PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Susan M W Dimock Age, 60-3-25

Date and Place of Death,† - *died at* Winthrop (Quincy Ave) Jan 10" 1897.

Disease or Cause of Death, - *of* Heart Disease (Anasarca)
(Primary and Secondary.)‡

Duration of Sickness, - - Two months

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, O. E. Johnson. M.D

Date of Certificate, Jan 11 1897.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. October, 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death,	Jan 10 1897
2. Name,	Helen B Batti
(Maiden Name),*	—
(Name of Husband),*	—
3. Sex, and whether single,	Female
Married, or Widowed,	—
4. Color,†	White
5. Age,	4 Years, — Months, — Days.
6. Disease or Cause of Death, (Primary and Secondary),‡	Dr R B Bowman
Duration of Sickness,	
By whom certified,	
7. Residence,	Wantiagh
8. Occupation,	—
9. Place of Death,	Wantiagh Rural
10. Place of Birth,	" "
11. Name of Father,	Fred H Batti
12. Name of Mother, (Maiden Name),	Lillian B Baker
13. Birthplace of Father,	East Boston
14. Birthplace of Mother,	Jamaica L.I.
15. Place of Interment,	Wantiagh Cemetery
Signature of Undertaker ~~or other person~~ making the Return,	Lucius Fine

DATED at Hempstead, on Jan 11 1897

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

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SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Helen B. Battis Age, 1 Years

Date and Place of Death,† - *died at* Winthrop Jan 10" 189 7,

Disease or Cause of Death, - *of* Pneumonitis
(Primary and Secondary.)‡

Duration of Sickness, - - Three days

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Albert B. Dorman M.D.

Date of Certificate, Jan. 11th 189 7.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. October, 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

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PHYSICIAN'S CERTIFICATE OF THE CAUSE OF DEATH.

Boston, Jan 21 189 7

Name and age of deceased: Annetta Moro Age 49 yrs. mos. dys.

Date and place of death: Jan 19 Underhill St

Disease or cause of death: Cancer and Impetigo

Duration of disease:* About one and one half years

I certify that the above is true, to the best of my knowledge and belief.

Name and residence of physician. Edward F. Gay M. D.

*It is very desirable to be informed of the duration of the disease.

The office of the Board of Health will be open for the granting of permits for burial, as follows:—Saturdays, 9 A.M. till 2 P.M.; Sundays, 10 A.M. till 12 M.; Holidays, from 10 A.M. till 12 M.; other days, from 9 A.M. till 5 P.M.

UNDERTAKER'S RETURN.—~~Boston.~~

Date of death, Jan 19 1897 Name, Amelia Hynes

Maiden name,* Amelia Hynes Sex, Female

Married, ~~single, or widow of~~ wife of Joseph Hynes

Color, W Age, 49 years, mos., days. Residence, Undertaker & Furniture Dealer 10 Cottage

Place of death (street and number), Undertaker & Furniture Dealer ward

Place of birth, Salem Mass Occupation, Saleswoman

Name of father, Edward Hynes Maiden name of mother, Jane Upsdell

Birthplace of father, Ireland Birthplace of mother, Ireland

Place of interment,† Holy Cross Cemetery Malden

*If a married woman or a widow. † Give the name of the burial ground.

Signature of Undertaker:

Joseph Hynes

E Boston

No. .....

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	January 22nd 1897
2. Name, ...	Pritchard
(Maiden Name),* .	~
(Name of Husband),*	~
3. Sex, and whether single,	Female
Married, or Widowed,	~
4. Color,†	White
5. Age, ...	~ Years, ~ Months, ~ Days.
6. (Disease or Cause of Death, (Primary and Secondary),‡ / Duration of Sickness, . / By whom certified, .	Old age 15 days Norman
7. Residence, ...	Winters (College Hill)
8. Occupation, ...	~
9. Place of Death, . . .	Farm Bar Ave.
10. Place of Birth, . . .	" "
11. Name of Father, . .	Charles H. Whitney
12. Name of Mother, . . (Maiden Name),	Harriet A. Booth
13. Birthplace of Father, .	Boston Mass
14. Birthplace of Mother, .	England
15. Place of Interment, .	Winters Cemetery
Signature of Undertaker ~~or other person~~ making the Return, ...	Summers Lloyd

DATED at Winters, on Jan 23 1897

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

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PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Whitney Age, 1 hour

Date and Place of Death,† - *died at* Waithop Jan. 22d/11 1897,

Disease or Cause of Death, - *of* Premature
(Primary and Secondary.)‡

Duration of Sickness, - -

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Albert B. Dorman, M.D.

Date of Certificate, Jan. 22d/11 1897.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. October, 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

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SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

No. .....

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	February 4th 1897
2. Name, ...	Emma F. Beach
(Maiden Name),* .	Spooner
(Name of Husband),*	Cyrus J Beach
3. Sex, and whether single,	Female
Married, or Widowed,	Married
4. Color,†	White
5. Age, ...	39 Years, 5 Months, ~ Days.
6. (Disease or Cause of Death, (Primary and Secondary),‡ Duration of Sickness, .	Disease Liver
(By whom certified, .	
7. Residence, ...	Whitby Town
8. Occupation, ...	
9. Place of Death, . . .	Whitby Ont
10. Place of Birth, . . .	England
11. Name of Father, . .	James Spooner
12. Name of Mother, . . (Maiden Name),	Ann Adams Spooner
13. Birthplace of Father, .	England Yorkshire
14. Birthplace of Mother, .	England Yorkshire
15. Place of Interment, .	Whitby Cemetery
Signature of Undertaker or other person making the Return, ...	James Elgie

DATED at Whitby, on February 4 1897

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Emma Butler Age, 39 yrs 1 mo

Date and Place of Death,† - *died at* Winthrop Feb 4th 1897,

Disease or Cause of Death, - *of* Septic Peritonitis
(Primary and Secondary.)‡

Duration of Sickness, - - 7 days

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Brian Cronin M.D.

Date of Certificate, Feb 6th 1897.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. October, 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	February 7" 1897
2. Name, ...	Catharine Floyd
(Maiden Name),* .	" Connelly
(Name of Husband),*	Josiah Floyd
3. Sex, and whether single,	Female
Married, or Widowed,	Widowed
4. Color,†	White
5. Age, ...	79 Years, — Months, — Days.
6. Disease or Cause of Death, (Primary and Secondary),‡ Duration of Sickness, .	Dr Johnson
By whom certified, .	
7. Residence, ...	Winthrop Mass
8. Occupation, ...	
9. Place of Death, . . .	Coza Street
10. Place of Birth, . . .	Ireland
11. Name of Father, . .	
12. Name of Mother, (Maiden Name), . .	
13. Birthplace of Father, .	Ireland
14. Birthplace of Mother, .	Ireland
15. Place of Interment, .	Holy Cross Cemetery
Signature of Undertaker ~~or other person~~ making the Return, ...	[illegible]

DATED at Winthrop, on February 8" 1897

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Catharine Floyd Age, 77 yrs.

Date and Place of Death,† - died at Winthrop (Coast St) Feb 7" 1897,

Disease or Cause of Death, - of Senility (Old age)
(Primary and Secondary.)‡

Duration of Sickness, - - 1 month under Observation

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, C. E. Johnson

Date of Certificate, Feb 8 1897.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. October, 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

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PHYSICIAN'S CERTIFICATE OF THE CAUSE OF DEATH.

~~Medford~~, Winthrop Mar. 4 & 1897

Name of Deceased, C. Augusta Berry Age, 53 Yrs., 5 Mos., 3 Days.

Place and Date of Death: Died at 173 Shirley St Winthrop Medford, Feb 7 1897

Disease or cause of Death: Primary, Hemiplegia (Apoplexy)

(If a soldier who served in the War of the Rebellion, both the primary and secondary causes of death must be given.)* Secondary,

Duration of Disease,† Eight months

I certify that the above is true, to the best of my knowledge and belief,

Signature of Physician, F. E. Johnson M.D.

Residence, 75 Winthrop St Winthrop Mass.
(No.) (Street.) (Town or City.)

*Acts of 1889, Chap. 224. † It is very desirable to be informed of the duration of the disease.

UNDERTAKER'S RETURN.

Winthrop

MEDFORD, MASS.

Date of Death, Feb 7 1897 Name, Augusta Berg

Maiden Name,* Krueger Name of Husband,* George L.

Sex, Female Color,† White Single, ~~Married, or~~ Widowed, Mass Widow

Age, 55 Yrs., 5 Mos., 3 Days. Residence, Winthrop (No.) (Street) Mass (Town or City and State.)

Place of Death, (Street and Number.) Winthrop 76 Shirley Medford. Ward

Occupation, ——— Place of Birth, Boston Mass

Name of Father, Wm A Krueger Maiden Name of Mother, Andrews

Birthplace of Father, Boston Mass Birthplace of Mother, Canton Mass

Place of interment, Oak Grove (Cemetery.), Medford Mass (Town or City and State.)

*If a married woman or a widow. †If other than white, (A) African, (M) Mulatto, (I) Indian; if of other races, specify what.

Signature of Undertaker, Geo Mc Lellan

Residence, 26 (No.) Highland (Street.) Medford (Town or City.) Mass

No. .....

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	February 14th 1897.
2. Name, ...	Abbie A. Floyd
(Maiden Name),* .	Allen
(Name of Husband),*	Fred W. F.
3. Sex, and whether single,	Female
Married, or Widowed,	Married
4. Color,†	W
5. Age, ...	57 Years, 8 Months, 4 Days.
6. (Disease or Cause of Death, (Primary and Secondary),‡	Fever
(Duration of Sickness, .	
(By whom certified, .	
7. Residence, ...	Lowell Mass
8. Occupation, ...	
9. Place of Death, . . .	Lowell
10. Place of Birth, . . .	Bradford Mass
11. Name of Father, . .	[illegible] Allen
12. Name of Mother, . . (Maiden Name),	Susan Tice
13. Birthplace of Father, .	[illegible]
14. Birthplace of Mother, .	Bradford Mass
15. Place of Interment, .	Lowell [illegible]
Signature of Undertaker or other person making the Return, . . .	[illegible] Flagg

DATED at Lowell, on Feb 15 1897

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** [illegible] *Age,* [illegible]

Date and Place of Death,† - *died at* [illegible] *189* [illegible],

Disease or Cause of Death, - *of* [illegible]
(*Primary and Secondary.*)‡

Duration of Sickness, - - [illegible]

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, [illegible]

Date of Certificate, [illegible] *189* [illegible].

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. October, 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

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No. .....

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	Febru 25 1897
2. Name, ...	Elmira Harrison Bur
(Maiden Name),* .	
(Name of Husband),*	
3. Sex, and whether single,	Male
Married, or Widowed,	Married
4. Color,†	White — Aug 3 96
5. Age, ...	54 Years, 6 Months, 22 Days.
6. Disease or Cause of Death, (Primary and Secondary),‡	
Duration of Sickness, .	
By whom certified, .	
7. Residence, ...	[illegible]
8. Occupation, ...	Builder
9. Place of Death, . . .	[illegible]
10. Place of Birth, . . .	[illegible]
11. Name of Father, . .	William Bur
12. Name of Mother, . . (Maiden Name),	Lousy Lambe
13. Birthplace of Father, .	[illegible]
14. Birthplace of Mother, .	[illegible]
15. Place of Interment, .	Winthrop Cemetery
Signature of Undertaker or other person making the Return, . . .	[illegible]

DATED at Winth, on Feb 26 18 .

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

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SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Charles H. Brown Age, 57 yrs

Date and Place of Death,† died at Winthrop, Feb'y 25th, 1897,

Disease or Cause of Death, (*Primary and Secondary.*)‡ of Chronic Catarrhal Gastro Enteritis.
Secondary to
Pulmonary Tuberculosis.

Duration of Sickness, Time Unknown.

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Frank A. Tilton M.D. 15 Princeton St, East Boston Mass.

Date of Certificate, Feb. 27 1897.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. October, 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

Commonwealth of Massachusetts.

No. ....

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	March 3 1897
2. Name, ...	Lizzie G. Thompson
(Maiden Name),* .	[illegible]
(Name of Husband),*	—
3. Sex, and whether single,	Female
Married, or Widowed,	—
4. Color,†	White
5. Age, ...	10 Years, 10 Months, 26 Days.
(Disease or Cause of Death, (Primary and Secondary),‡	
6. Duration of Sickness, .	
(By whom certified, .	
7. Residence, ...	Winthrop
8. Occupation, ...	
9. Place of Death, . . .	Pleasant St Cor Lawrence Ave
10. Place of Birth, . . .	" " " " "
11. Name of Father, . .	Archibald C.
12. Name of Mother, . . (Maiden Name),	Lizzie G. Collins
13. Birthplace of Father, .	Bermuda W. Indies
14. Birthplace of Mother, .	Truro Mass
15. Place of Interment, .	Winthrop Ameley
Signature of Undertaker ~~or other person~~ making the Return, ...	Sumner Floyd

DATED at Winthrop, on March 3" 1897

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263*

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for regi
tration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which
died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dyi
immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificat
stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician ne
lects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceedi
fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give bo
the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglec
to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until h
has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such cit
or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent o
clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned an
recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lie
thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physicia
cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or an
physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as
required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same
When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forth
with countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so give
shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as th
clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceed
ing fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Sidney Gross Thompson Age, 11 mos

Date and Place of Death,† - *died at* Winthrop, March 2nd 1897,

Disease or Cause of Death, - *of* Primary Capillary Bronchitis; Apnoea (secondary)
(Primary and Secondary.)‡

Duration of Sickness, - - 7 days

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Frank N. Allen M. D

Date of Certificate, March 3rd 1897.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. October, 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE OF THE CAUSE OF DEATH.

Boston, March 5 189 7

Name and age of deceased: Bernard McShane Age 4 1 yrs. mos. dys.

Date and place of death: March 5-1897 Gerald st. Westbrook

Disease or cause of death: Pneumonia.

Duration of disease:* one week

I certify that the above is true, to the best of my knowledge and belief.

Name and residence of physician. } W T Bulger Michael St Boston. M. D.

*It is very desirable to be informed of the duration of the disease.

The office of the Board of Health will be open for the granting of permits for burial, as follows:—Saturdays, 9 A. M. till 2 P.M.; Sundays, 10 A.M. till 12 M.; Holidays, from 10 A.M. till 12 M.; other days, from 9 A.M till 5 P.M.

UNDERTAKER'S RETURN.—Boston.

Date of death, March 5 1897 Name, Barnard Mrs Shane

Maiden name,* —— Sex, Fe

Married, ~~single, or widow~~ of —— wife of ——

Color, W Age, 41 years, ... mos., ... days. Residence, Gerald St

Place of death (street and number), Gerald St. Winthrop ward

Place of birth, Ireland Occupation, Laborer

Name of father, Barnard Maiden name of mother, Ann M. Burke

Birthplace of father, Ireland Birthplace of mother, Ireland

Place of interment,† "Holy Cross" Malden

*If a married woman or a widow. † Give the name of the burial ground.

Signature of Undertaker:

Thos. J. Lane

No. .....

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	March 6th 1897
2. Name, ...	Turner Tracy Whitten
(Maiden Name),* .	
(Name of Husband),*	
3. Sex, and whether single,	Male.
Married, or Widowed,	
4. Color,†	White
5. Age, ...	Years, 4 Months, Days.
(Disease or Cause of Death, (Primary and Secondary),‡	a, B,
6. Duration of Sickness, .	Dr Dorman
(By whom certified, .	
7. Residence, ...	Winthrop Mass
8. Occupation, ...	
9. Place of Death, . . .	Hillside Avenue
10. Place of Birth, . . .	Winthrop
11. Name of Father, . .	[illegible]
12. Name of Mother, . . (Maiden Name),	Mary E. Turner
13. Birthplace of Father, .	[illegible]
14. Birthplace of Mother, .	[illegible]
15. Place of Interment, .	Winthrop Cemetery
Signature of Undertaker ~~or other person~~ making the Return, ...	Sumner Floyd

Dated at Winthrop, on Mch 6th 1897

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

Commonwealth of Massachusetts.

No. .....

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	March 7th 1907
2. Name, ...	William Edward Blackwell
(Maiden Name),* .	———
(Name of Husband),*	———
3. Sex, and whether single,	Male
Married, or Widowed,	Married
4. Color,†	White
5. Age, ...	38 Years, 5 Months, — Days. 14
6. (Disease or Cause of Death, (Primary and Secondary),‡	
(Duration of Sickness, .	
(By whom certified, .	
7. Residence, ...	Putnam, Conn.
8. Occupation, ...	Fruit Handler Baker
9. Place of Death, . . .	Putnam, Conn.
10. Place of Birth, . . .	Coventry, England
11. Name of Father, . .	William L. Blackwell
12. Name of Mother, . . (Malden Name),	Charlotte Taylor
13. Birthplace of Father, .	[illegible]
14. Birthplace of Mother, .	[illegible]
15. Place of Interment, .	Westfield Cemetery
Signature of Undertaker ~~or other person~~ making the Return, . . .	Lucius Floyd

DATED at Putnam, on March 7th 1907

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** William Blackwell Age, 34 yrs

Date and Place of Death,† - *died at* Winthrop (Amelia St) May 7th 1897,

Disease or Cause of Death, - *of* Suicide by taking Opium
(Primary and Secondary.)‡

Duration of Sickness, - -

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Albert B. Dorman, M.D.

Date of Certificate, May 8th 1897.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. October, 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

No. .....

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	March 11" 1897
2. Name, ...	Joseph Landry
(Maiden Name),* .	
(Name of Husband),*	
3. Sex, and whether single,	Single
Married, or Widowed,	S.
4. Color,†	White
5. Age, ...	17 Years, 11 Months, 19 Days.
(Disease or Cause of Death, (Primary and Secondary),‡	
6. Duration of Sickness, .	
By whom certified, .	
7. Residence, ...	Yarmouth Mass
8. Occupation, ...	Farmer's Son
9. Place of Death, . . .	Res. Ward 1
10. Place of Birth, . . .	Southbridge Mass
11. Name of Father, . .	Joseph Landry
12. Name of Mother, . . (Maiden Name),	Rosa Landry
13. Birthplace of Father, .	Canada
14. Birthplace of Mother, .	[illegible]
15. Place of Interment, .	Holy Cross, Mal[illegible]
Signature of Undertaker or other person making the Return, ...	[illegible] Funeral

DATED at Yarmouth, on March 11 1897.

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Joseph Lavoie Age, 17 yrs 11 mo 17 d

Date and Place of Death,† died at Winthrop (Read St) Mar 11 " 1897,

Disease or Cause of Death, (*Primary and Secondary.*)‡ of Cerebral Meningitis (Brain fever)

Duration of Sickness,

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, C. E. Donovan MD

Date of Certificate, March 11 1897.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. October, 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

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Commonwealth of Massachusetts.

No. .....

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	March 13" 1897
2. Name, ...	Andrew Hammond
(Maiden Name),* .	
(Name of Husband),*	
3. Sex, and whether single,	Male
Married, or Widowed,	Married
4. Color,†	
5. Age, ...	50 Years, 1 Months, 8 Days.
6. Disease or Cause of Death, (Primary and Secondary),‡	
Duration of Sickness, .	
By whom certified, .	
7. Residence, ...	Marshfield Mass
8. Occupation, ...	Carpenter
9. Place of Death, . . .	Marshfield Mass
10. Place of Birth, . . .	[illegible]
11. Name of Father, . .	John [illegible]
12. Name of Mother, . . (Maiden Name).	Amelia [illegible]
13. Birthplace of Father, .	[illegible]
14. Birthplace of Mother, .	[illegible]
15. Place of Interment, .	[illegible]
Signature of Undertaker or other person making the Return, ...	[illegible]

DATED at [illegible], on [illegible] 18[illegible].

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Andrew Ostammand Age, 50 yrs - 1 mo - 8 da.

Date and Place of Death,† - died at Winthrop (Maverick St) Mar 13 1897,

Disease or Cause of Death, - of Compound Fracture Septic Fever
(Primary and Secondary.)‡

Duration of Sickness, - - Thirteen days

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Horace J Soule M D

Date of Certificate, March 15 1897.

* Or Sex of Infant (not named). If stillborn so state. ‖ If child died immediately after birth so state. † If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. October, 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

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Commonwealth of Massachusetts.

No. .....

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	March 18" 1897
2. Name, ...	Eliza A. Wilkie
(Maiden Name),* .	Eliza A. Buffum
(Name of Husband),*	Walter Wilkie
3. Sex, and whether single,	Female
Married, or Widowed,	Widowed
4. Color,†	White
5. Age, ...	78 Years, 0 Months, 23 Days.
(Disease or Cause of Death, (Primary and Secondary),‡	
6. Duration of Sickness, .	[illegible]
(By whom certified, .	
7. Residence, ...	Winthrop
8. Occupation, ...	Housewife
9. Place of Death, . . .	Fremont St
10. Place of Birth, . . .	Buffalo N.Y.
11. Name of Father, . .	Unknown
12. Name of Mother, . . (Maiden Name),	Unknown
13. Birthplace of Father, .	Unknown
14. Birthplace of Mother, .	Unknown
15. Place of Interment, .	Winthrop Cemetery
Signature of Undertaker ~~or other person~~ making the Return, ...	Sumner Floyd

DATED at Winthrop, on March 18" 1897

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Eliza A. Wilkie Age, 78 yr. 23 days

Date and Place of Death,† died at Winthrop Mass March 18 1897,

Disease or Cause of Death, (*Primary and Secondary.*)‡ of Cancer of Stomach.

Duration of Sickness, six months

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, J. E. Johnson M.D.

Date of Certificate, March 20 1897.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. October, 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE OF THE CAUSE OF DEATH.

Boston, Mar. 22 5 189 7

Name and age of deceased: Gertrude Watkins Age 21 yrs. mos. dys.

Date and place of death: Mar. 22 5 Chilton St - Mass

Disease or cause of death: Suicide Drowned

*Duration of disease.**

I certify that the above is true, to the best of my knowledge and belief.

Name and residence of physician. Francis A Harris M. D.

Med Exam

*It is very desirable to be informed of the duration of the disease.

The office of the Board of Health will be open for the granting of permits for burial, as follows:—Saturdays, 9 A. M. till 2 P. M.; Sundays, 10 A. M. till 12 M.; Holidays, from 10 A. M. till 12 M.; other days. from 9 A. M. till 5 P. M.

UNDERTAKER'S RETURN.—Boston.

Date of death, March 22" 1897 Name, Gertrude M. Watterys

Maiden name,* ~~Married~~, single, ~~or widow of~~ Single ~~wife of~~

Sex,

Color, W Age, 21 years, 5 mos., 13 days. Residence, Coral Avenue (O'Hara)

Place of death (street and number), Coral Avenue Ocean Spray ward 4

Place of birth, Somerville Mass Occupation, Book-Keeper

Name of father, William Maiden name of mother, Elizabeth C. Jordan

Birthplace of father, Nova Scotia Birthplace of mother, Nova Scotia

Place of interment,† Woodlawn Cemetery

*If a married woman or a widow. † Give the name of the burial ground.

Signature of Undertaker: Sumner Floyd

Waltham, Mass

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	May 31 1899
2. Name, ...	Clarissa B. Angier
(Maiden Name),* .	Burbank
(Name of Husband),*	William R Angier
3. Sex, and whether single,	Female
Married, or Widowed,	Married
4. Color,†	White
5. Age, ...	66 Years, 7 Months, — Days.
6. Disease or Cause of Death, (Primary and Secondary),‡	
Duration of Sickness, .	[illegible]
By whom certified, .	
7. Residence, ...	Newton Mass
8. Occupation, ...	Domestic
9. Place of Death, . . .	Newton Mass
10. Place of Birth, . . .	East Mass
11. Name of Father, . .	John [illegible] Burbank
12. Name of Mother, . . (Maiden Name),	Clarissa Burbank
13. Birthplace of Father, .	East Mass
14. Birthplace of Mother, .	East Mass
15. Place of Interment, .	Cypress
Signature of Undertaker ~~or other person~~ making the Return, ...	[illegible]

DATED at Newton, on June 1 18 99

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Clarissa B. Ingraham. *Age,* 66 yrs 7 mos

Date and Place of Death,† - *died at* Winthrop (Marshall St.) March 31 " 1897 ,

Disease or Cause of Death, - *of* Cerebral Meningitis .
(Primary and Secondary.)‡

Duration of Sickness, - -

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, F E Johnson MD

Date of Certificate, April 1897 .

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. October, 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

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Commonwealth of Massachusetts.

No. .....

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	March 31st 97
2. Name, ...	Edward C. Hathaway
(Maiden Name),* .	
(Name of Husband),*	
3. Sex, and whether single,	Single
Married, or Widowed,	
4. Color,†	White
5. Age, ...	22 Years, X Months, 2 Days.
6. Disease or Cause of Death, (Primary and Secondary),‡ Duration of Sickness, .	Consumption 3 years
By whom certified, .	Geo. F. Foster
7. Residence, ...	South Wareham Mass
8. Occupation, ...	Machinest
9. Place of Death, . . .	Winthrop Mass
10. Place of Birth, . . .	South Wareham
11. Name of Father, . .	Daniel Hathaway
12. Name of Mother, . . (Maiden Name),	Emily " "
13. Birthplace of Father, .	South Wareham
14. Birthplace of Mother, .	Quincy Missouri
15. Place of Interment, .	Wareham Mass
Signature of Undertaker or other person making the Return, . . .	Burnham Bros

DATED at Winthrop, on March 31 18 .

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

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PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Edward C. Carter Age, [illegible]

Date and Place of Death,† - died at Southboro, Mass. Mar 14 189[illegible],

Disease or Cause of Death, - of Tuberculosis of the Lungs
(Primary and Secondary.)‡

Duration of Sickness, - - about 3 years

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Herbert Kinnan, M.D.

Date of Certificate, Mar 16 189[illegible].

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. October, 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

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PHYSICIAN'S CERTIFICATE OF THE CAUSE OF DEATH.

Boston, April 14 1897

Name and age of deceased: Lillie B. Chase Age 20 yrs. 9 mos. 7 dys

Date and place of death: April 14-97 Cottage Park Road Winthrop

Disease or cause of death: Diabetes

*Duration of disease.** Four years

I certify that the above is true, to the best of my knowledge and belief.

Name and residence of physician. Winthrop Mass Home J Soule M. D.

*It is very desirable to be informed of the duration of the disease.

The office of the Board of Health will be open for the granting of permits for burial, as follows:—Saturdays, 9 A. M. till 2 P. M.; Sundays, 10 A. M. till 12 M.; Holidays, from 10 A. M. till 12 M.; other days, from 9 A. M. till 5 P. M.

UNDERTAKER'S RETURN.—~~Boston.~~ Winthrop

Date of death, April 14 1897 Name, Lillie B. Chase

~~Maiden name~~,* Sex, F.

~~Married~~, single, ~~or widow of~~ ~~wife of~~

Color, W Age 20 years, 9 mos., 7 days. Residence, Cottage Park Road

Place of death (street and number), Cottage Park Road Winthrop ward

Place of birth, E. Boston Occupation, At Home

Name of father, Osgood Maiden name of mother, Lillie Bruce

Birthplace of father, Boston Birthplace of mother, Cambridge

Place of interment,† Woodlawn Cem.

* If a married woman or a widow. † Give the name of the burial ground.

Signature of Undertaker: E. G. Brown

No. .....

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	April 15 1897
2. Name, ...	Francis Frick
(Maiden Name),* .	—
(Name of Husband),*	—
3. Sex, and whether single,	Male
Married, or Widowed,	Married
4. Color,†	White
5. Age, ...	73 Years, 2 Months, 13 Days.
6. Disease or Cause of Death, (Primary and Secondary),‡ Duration of Sickness, .	
By whom certified, .	[illegible]
7. Residence, ...	[illegible]
8. Occupation, ...	Retired
9. Place of Death, . . .	[illegible]
10. Place of Birth, . . .	[illegible]
11. Name of Father, . .	James
12. Name of Mother, . . (Maiden Name),	[illegible]
13. Birthplace of Father, .	[illegible]
14. Birthplace of Mother, .	[illegible]
15. Place of Interment, .	[illegible]
Signature of Undertaker ~~or other person~~ making the Return, ...	[illegible]

DATED at [illegible], on April 15 18[illegible].

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceed-

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Mowill Hart Age, 73-3-13

Date and Place of Death,† - *died at* Winthrop Sargent Street April 15 1897,

Disease or Cause of Death, - *of* pneumonia

(Primary and Secondary.)‡

Duration of Sickness, - - 10 days

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, O. E. Johnson M.D. Winthrop

Date of Certificate, April 18 1897.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. October, 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

Commonwealth of Massachusetts.

No. .....

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	May 9" 1897
2. Name, ...	Ella B. Payne
(Maiden Name),* .	Fay
(Name of Husband),*	George F. Payne
3. Sex, and whether single,	Female
Married, or Widowed,	Married
4. Color,†	White
5. Age, ...	44 Years, 6 Months, 7 Days.
(Disease or Cause of Death, (Primary and Secondary),‡	
6. Duration of Sickness, .	Dr Percy B. Brown
(By whom certified, .	
7. Residence, ...	Winthrop Mass
8. Occupation, ...	
9. Place of Death, . . .	5 Thornton Park
10. Place of Birth, . . .	Boston Mass
11. Name of Father, . .	Henry A. Fay
12. Name of Mother, . . (Maiden Name),	Mary Fay
13. Birthplace of Father, .	Southboro Mass
14. Birthplace of Mother, .	Waynabuck N. S.
15. Place of Interment, .	Winthrop Cemetery
Signature of Undertaker ~~or other person~~ making the Return, ...	Sumner Floyd

DATED at Winthrop, on May 9" 1897

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Ella S. Payne Age, 44 yr 6 mos

Date and Place of Death,† - *died at* Winthrop (Thornton Park) May 9th 1897,

Disease or Cause of Death, - *of* Carcinoma of right breast and secondary changes
(Primary and Secondary.)‡

Duration of Sickness, - - Years by months & hours

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Percy E. Purvis M.D.

Date of Certificate, May 10 1897.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. October, 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

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Commonwealth of Massachusetts.

No. .....

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	May 9" 1897
2. Name, ...	Florence Nourse
(Maiden Name),* .	
(Name of Husband),*	
3. Sex, and whether single,	Female (Single
Married, or Widowed,	
4. Color,†	White
5. Age, ...	20 Years, Months, Days.
6. Disease or Cause of Death, (Primary and Secondary),‡ Duration of Sickness, . By whom certified, .	Dr C F. Gage
7. Residence, ...	188 Longwood Avenue Boston
8. Occupation, ...	At home
9. Place of Death, . . .	Perkins Street. G. Head
10. Place of Birth, . . .	Boston
11. Name of Father, . .	Jacob G. Nourse
12. Name of Mother, . . (Maiden Name),	Susie Farrell
13. Birthplace of Father, .	Boston Mass
14. Birthplace of Mother, .	Montreal Canada
15. Place of Interment, .	Holyhood Cemetery Brookline
Signature of Undertaker ~~or other person~~ making the Return, ...	Sumner Floyd

DATED at Brookline, on May 10" 1897

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceed-

PHYSICIAN'S CERTIFICATE OF THE CAUSE OF DEATH.

Boston, May 16 189 7

Name and age of deceased: Florence C Vonnas Age 20 yrs ~ mos ~ dys

Date and place of death: May 9 " 1897

Disease or cause of death: Heart Disease supposed by attack of Acute indigestion

Duration of disease:* Fifteen years

I certify that the above is true, to the best of my knowledge and belief.

Name and residence of physician. } Edward F. Gage M. D.
#13 Great Ave Winthrop

*It is very desirable to be informed of the duration of the disease.

Commonwealth of Massachusetts.

No. ———

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . . Dec 16 1877
2. Name, ... Mary M. Daly
   (Maiden Name),* . Kelly
   (Name of Husband),* Chas J Daly
3. Sex, and whether single, F. S.
   Married, or Widowed, M. W. or D.
4. Color,† . . . . . White
5. Age, ... 57 Years, 9 Months, 2 Days.
   (Disease or Cause of Death, (Primary and Secondary),‡
6. Duration of Sickness, .
   By whom certified, .
7. Residence, ... 22 Pleasant
8. Occupation, ... Housekeeper
9. Place of Death, . . 22 Pleasant
10. Place of Birth, . . . Ireland
11. Name of Father, . . Patrick Kelly
12. Name of Mother, . . Catherine Kelly.
    (Maiden Name).
13. Birthplace of Father, . Ireland
14. Birthplace of Mother, . Ireland
15. Place of Interment, . Cambridge

Signature of Undertaker or other person making the Return, ... Thomas Fitzpatrick

DATED at Cambridge, on Dec 17, 1877.

* If a Married Woman or Widow. † If a Soldier who served in the War of the Rebellion.
‡ If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 2*

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for r tration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of whic died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certific stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician n lects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceedir fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give bc the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or negle to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until h has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such cit or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned a recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physi cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the s When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent sha with countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, a clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exce ing fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Mrs. Mary Ann Lord Age, 59-9-2

Date and Place of Death,† died at 22 Main St. Melrose May 16th 1897.

Disease or Cause of Death, (*Primary and Secondary.*)‡ of Carcinoma of Bladder with Exhaustion

Duration of Sickness, unknown

I certify that the above is true, to the best of my knowledge and belief.

Name and Residence of Certifying Physician, J. Wilson Parks. M.D. 31 Princeton St. E.B.

Date of Certificate, May 17th 1897.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. October, 1895.—5,000.

No.....

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

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Commonwealth of Massachusetts.

No. .....

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	May 22 1897
2. Name, ...	Mary A. Pratt
(Maiden Name),* .	Lovell
(Name of Husband),*	William Pratt
3. Sex, and whether single,	Fema[illegible]
Married, or Widowed,	Wid[illegible]
4. Color,†	Wh[illegible]
5. Age, ...	57 Years, 1 Months, 18 Days.
(Disease or Cause of Death, (Primary and Secondary),‡	
6. Duration of Sickness, .	
(By whom certified, .	
7. Residence, ...	[illegible]
8. Occupation, ...	
9. Place of Death, . . .	[illegible]
10. Place of Birth, . . .	[illegible]
11. Name of Father, . .	[illegible]
12. Name of Mother, . . (Maiden Name),	[illegible]
13. Birthplace of Father, .	[illegible]
14. Birthplace of Mother, .	[illegible]
15. Place of Interment, .	[illegible]
Signature of Undertaker ~~or other person~~ making the Return, . . .	[illegible]

DATED at Worthington, on May 22 18[illegible]

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate.• Ed. Dec., 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

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PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Mary A. Scott Age, 59y

Date and Place of Death,† died at Wilkinsop (Dunkirk) May 22 1897,

Disease or Cause of Death, (*Primary and Secondary.*)‡ of Apoplexy

Duration of Sickness,

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician,

Date of Certificate, May 25 1897.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. October, 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the [illegible] may require. Any person violating any of the provisions of this section shall be punished by a fine not exceed-

Commonwealth of Massachusetts.

No. .....

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	May 23rd 1897
2. Name, ...	Edith Shute
(Maiden Name),* .	
(Name of Husband),*	
3. Sex, and whether single,	Female
Married, or Widowed,	
4. Color,†	Colored
5. Age, ...	1 Years, 2 Months, 15 Days.
6. Disease or Cause of Death, (Primary and Secondary),‡	
Duration of Sickness, .	La Grippe
By whom certified, .	
7. Residence, ...	[illegible]
8. Occupation, ...	
9. Place of Death, . . .	Beach Road
10. Place of Birth, . . .	[illegible]
11. Name of Father, . .	William Shute
12. Name of Mother, . . (Maiden Name),	[illegible]
13. Birthplace of Father, .	[illegible]
14. Birthplace of Mother, .	Talbot Co.
15. Place of Interment, .	[illegible]
Signature of Undertaker or ~~other person~~ making the Return, . . . ,	Emma Floyd

DATED at [illegible], on May 24 1897

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Edith Knoch Age, 14 mos

Date and Place of Death,† - *died at* Bear Rock Whitney May 23 189 ,

Disease or Cause of Death, - *of* acute Bronchitis
(Primary and Secondary.)‡

Duration of Sickness, - - Immediate one week Complicating 2 months.

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, E. F. Eyer M.D.

Date of Certificate, May 25 189 7.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. October, 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE OF THE CAUSE OF DEATH.

Boston, Winthrop May 28 189 7

Name and age of deceased: John Francis Mooney Age — yrs. — mos. — dys.

Date and place of death: Winthrop Mass May 27, 97

Disease or cause of death: Marasmus (Premature Birth)

Duration of disease:*

I certify that the above is true, to the best of my knowledge and belief.

Name and residence of physician. F. E. Johnson M. D.
Winthrop Mass

*It is very desirable to be informed of the duration of the disease.

The office of the Board of Health will be open for the granting of permits for burial, as follows:—Saturdays, 9 A.M. till 2 P.M.; Sundays, 10 A.M. till 12 M.; Holidays, from 10 A.M. till 12 M.; other days, from 9 A.M. till 5 P.M.

UNDERTAKER'S RETURN.—Boston.

Date of death, May 27 189/ Name, John F. Mooney

Maiden name,* — Sex, M

~~Married~~, single, or widow of — wife of —

Color, W Age, — years, — mos., 11 days. Residence, 185 Winthrop st

Place of death (street and number), 185 Winthrop st. Winthrop ward Mass

Place of birth, Winthrop Mass Occupation, Salesman

Name of father, George F. Maiden name of mother, Josephine Messenger

Birthplace of father, Blairstown Iowa Birthplace of mother, East Boston

Place of interment,† "Holy Cross" Malden

*If a married woman or a widow. † Give the name of the burial ground.

Signature of Undertaker:

Thos. J. Lane.

Commonwealth of Massachusetts.

No. .....

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	May 28
2. Name, ...	Grace [illegible]
(Maiden Name),* .	Rand
(Name of Husband),*	Shaw [illegible]
3. Sex, and whether single,	Female
Married, or Widowed,	Married
4. Color,†	White
5. Age, ...	66 Years, 10 Months, 10 Days.
6. (Disease or Cause of Death, (Primary and Secondary),‡	L. [illegible]
Duration of Sickness, .	
By whom certified, .	
7. Residence, ...	Whitney, Mass
8. Occupation, ...	
9. Place of Death, . . .	[illegible] ave
10. Place of Birth, . . .	England
11. Name of Father, . .	George
12. Name of Mother, . . (Maiden Name),	Emily
13. Birthplace of Father, .	England
14. Birthplace of Mother, .	England
15. Place of Interment, .	Fern Dell Cemetery
Signature of Undertaker ~~or other person~~ making the Return, ...	[illegible]

DATED at Winthrop, on May 29 1897

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the sa When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall for with countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so g shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not ex ing fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Grace Cook — *Age,* 66 yr 10 mo 10 da

Date and Place of Death,† - *died at* Westby, Olde (Coffee) *May* 28 *1897,*

Disease or Cause of Death, - *of* Apoplexy

(Primary and Secondary.)‡

Duration of Sickness, - - Six months

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, J. Jamison M.D.

Date of Certificate, May 29 *1897.*

* Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. October, 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

Commonwealth of Massachusetts.

No. .....

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	June 1 1897
2. Name, ...	Jessie Griffin
(Maiden Name),* .	
(Name of Husband),*	
3. Sex, and whether single,	Fem.
Married, or Widowed,	Married
4. Color,†	White
5. Age, ...	80 Years, 9 Months, — Days.
6. Disease or Cause of Death, (Primary and Secondary), ‡ Duration of Sickness, . By whom certified,	
7. Residence, ...	North Dana
8. Occupation, ...	Blacksmith
9. Place of Death, . . .	Hospital Asylum
10. Place of Birth, . . .	Green Mo
11. Name of Father, . .	Unknown
12. Name of Mother, . . (Maiden Name),	Unknown Griffin
13. Birthplace of Father, .	Ireland
14. Birthplace of Mother, .	Poland Me
15. Place of Interment, .	North Dana
Signature of Undertaker or other person making the Return, ...	Lewis Fuller

DATED at Athol, on June 1 1897.

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Isaac Griffin Age, 80 yrs 9 mos

Date and Place of Death,† - died at Winthrop (Wash Co.) June 1st 1897,

Disease or Cause of Death, - of Apoplexy

(Primary and Secondary.)‡

Duration of Sickness, - - Last sickness about 6 mos,

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, F E Duncan MD.

Date of Certificate, June 4 1897.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. October, 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

To the Clerk of the City or Town in which the death oc

(FILL OUT WITH INK. ALL NAMES TO BE IN FULL.)

Date of Death, June 8" 1897

Full Name of Deceased, Otto Winthrop Becker

If a married or divorced woman or a widow give also: Maiden Name, ~~~

Name of Husband, ~~~

Sex, Male Color, White Single, ~~Married, Widowed or Divorced,~~

Age, 3 Years, 4 Months, 27 Days. Occupation, ~

* Residence {If out of town, also state fully.} Winthrop Mass

Place of Death, 1 Fremont Street

Place of Birth, 1 Fremont Street Winthrop Mass

Name and Birthplace of Father, August Becker - East Boston

Maiden Name and Birthplace of Mother,

Place of Burial (Give name of Cemetery) Woodlawn Cemetery Everett

Dated at Winthrop

on June 9" 1897

Signature and place of business of Undertaker. Sumner & Floyd
18 Hemen Street

PHYSICIAN'S CERTIFICATE.

Name and Age of Deceased,† Otto Winthrop Becker Age, 3 Y. 4 M. 27 D.

Place and Date of Death, died at Winthrop June 8 " 1897

Disease or Cause of Death,‡ Primary, Malignant Dyspepsia Duration,

Immediate, Duration,

I certify that the above is true to the best of my knowledge and belief.

Signature and Residence of Certifying Physician. H B McMichael M. D.
East Boston

Date of Certificate, June 8" 1897

RETURN OF THE DEATH

OF

Otto Winthrop Becker

at 1 Fremont Street

Date, June 8" 1897

Filed, June 8" 1897

[Extracts from Chapter 29, Revised Laws.]

Section 6. Every householder in whose house a death occurs and the oldest next of kin of a deceased person in the or town in which the death occurs, shall, within five days thereafter, cause notice thereof to be given to the board of health o the town clerk.

Section 7. The commanding officer of a vessel shall give notice of the death of any person under his charge to the rd of health or to the clerk of the city or town within the Commonwealth at which his vessel first arrives after such death.

Section 8. Penalty for neglect to comply with the requirements of sections 6 and 7, five dollars.

Section 10. A physician shall forthwith after the death of a person whom he has attended during his last illness, at the uest of an undertaker or other authorized person or of any member of the family of the deceased, furnish for registration rtificate setting forth the required facts.

Section 11. If the deceased was a soldier or sailor who served in the war of the rebellion, give both the primary and secondary or immediate cause of death as nearly as he can state the same. Penalty for refusal or neglect, ten dollars.

Section 12. Every undertaker or other person who has charge of a funeral, shall forthwith obtain the physician's cer- ate required by section 10, enter thereon the facts required by section 1, and return it to the board of health or to the clerk he city or town in which the death occurred. The person making such return shall receive from the city or town a fee of nty-five cents.

[Extracts from Chapter 78, Revised Laws.]

Section 38. No undertaker or other person shall bury a human body in a city, or town or remove therefrom a human y which has not been buried, until a permit from the board of health or its agent has been received. *No such permit shall issued until there shall have been delivered to such board a written statement, containing the facts required by law, with a*

Commonwealth of Massachusetts.

No. 226

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	June 13" 1897
2. Name, ...	Camille Mathilde Gilbert
(Maiden Name),* .	Dupuis
(Name of Husband),*	Nathaniel B.
3. Sex, and whether single,	Female
Married, or Widowed,	Married
4. Color,†	White
5. Age, ...	52 Years, 6 Months, 21 Days.
(Disease or Cause of Death, (Primary and Secondary),‡	
6. Duration of Sickness, .	
(By whom certified, .	
7. Residence, ...	Somerville Ave.
8. Occupation, ...	Home
9. Place of Death, . . .	Somerville
10. Place of Birth, . . .	Canada
11. Name of Father, . .	Dupuis
12. Name of Mother, . . (Maiden Name),	Jane Thevalt
13. Birthplace of Father, .	Canada
14. Birthplace of Mother, .	Canada
15. Place of Interment, .	Mount Auburn
Signature of Undertaker ~~or other person~~ making the Return, ...	Simmons Flood

DATED at Boston, . on June 15 18 97

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Charlotte M Collins Age, 32-6-21

Date and Place of Death,† - *died at* Hawthorn (Somerset Ave) June 13 " 1897,

Disease or Cause of Death, - *of* Tuberculosis
(Primary and Secondary.)‡

Duration of Sickness, - -

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, ...

Date of Certificate, ... 189 .

* Or Sex of Infant (not named). If stillborn so state.

† If child died immediately after birth so state.

‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. October, 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

Commonwealth of Massachusetts.

No. .....

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	June 16 1897
2. Name, ...	Louis L. [illegible]
(Maiden Name),* .	
(Name of Husband),*	
3. Sex, and whether single,	Female
Married, or Widowed,	
4. Color,†	White
5. Age, ...	Years, 1 Months, 4 Days.
6. (Disease or Cause of Death, (Primary and Secondary),‡	
Duration of Sickness, .	
(By whom certified, .	
7. Residence, ...	Winthrop
8. Occupation, ...	
9. Place of Death, . . .	Shirley Ave
10. Place of Birth, . . .	Winthrop
11. Name of Father, . .	William A. Fuller
12. Name of Mother, . . (Maiden Name),	Lizzie L. [illegible]
13. Birthplace of Father, .	Canada
14. Birthplace of Mother, .	[illegible]
15. Place of Interment, .	Winthrop Cemetery
Signature of Undertaker or other person making the Return, ...	Sumner Pope

DATED at Winthrop, on June 16 1897

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Louie L Daniels Age, 1 Mo

Date and Place of Death,† died at Winthrop (Shirley Ct) June 16 1897,

Disease or Cause of Death, (*Primary and Secondary.*) ‡ of Malnutrition

Duration of Sickness, Four weeks

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, A. B. Dorman MD

Date of Certificate, June 23d 1897.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ Of a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. October, 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

Commonwealth of Massachusetts.

No. .....

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	June 19" 1897
2. Name, ...	Stillborn Infant
(Maiden Name),* .	
(Name of Husband),*	
3. Sex, and whether single,	Male
Married, or Widowed,	
4. Color,†	White
5. Age, ...	Years, Months, Days.
6. Disease or Cause of Death, (Primary and Secondary),‡	Stillborn
Duration of Sickness, .	
By whom certified, .	
7. Residence, ...	Winthrop Mass
8. Occupation, ...	
9. Place of Death, . . .	Buchanan Street
10. Place of Birth, . . .	Winthrop Mass
11. Name of Father, . .	William W. Baker
12. Name of Mother, (Maiden Name), . .	Mary Ella Baker
13. Birthplace of Father, .	Unknown
14. Birthplace of Mother, .	Unknown
15. Place of Interment, .	Winthrop Cemetery
Signature of Undertaker ~~or other person~~ making the Return, ...	Truman Floyd

DATED at Winthrop, on June 20 1897

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Stillborn Infant (Barker (Male) *Age,*

Date and Place of Death,† - *died at* Winthrop (Buchanan St) June 19th 1897,

Disease or Cause of Death, - *of* Inanition
(Primary and Secondary.)‡

Duration of Sickness, - -

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Horace J. Porter M.D.

Date of Certificate, June 21 *1897.*

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December. 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

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Commonwealth of Massachusetts.

No. ...

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	June 19 1897
2. Name, ...	Mary E. Bancroft
(Maiden Name),* .	Lawton
(Name of Husband),*	William H. Bancroft
3. Sex, and whether single,	Female
Married, or Widowed,	Married
4. Color,†	White
5. Age, ...	37 Years, ~ Months, 21 Days.
(Disease or Cause of Death, (Primary and Secondary),‡	
6. Duration of Sickness, .	
(By whom certified, .	
7. Residence, ...	Duxbury Mass
8. Occupation, ...	Housework
9. Place of Death, . . .	Duxbury Mass
10. Place of Birth, . . .	Boston
11. Name of Father. . .	William W
12. Name of Mother, . . (Maiden Name),	[illegible] Ella
13. Birthplace of Father, .	[illegible]
14. Birthplace of Mother. .	[illegible]
15. Place of Interment, .	Winthrop Cemetery
Signature of Undertaker or other person making the Return, . . .	[illegible] Undertaker

DATED at Winthrop, on June 20 18 97

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896. — 5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Mary Ella Barker Age, 37 yrs - 2 mos

Date and Place of Death,† - died at Winthrop (Buchanan Co) June 19 1897,

Disease or Cause of Death, - of Bright's disease of Kidneys
(Primary and Secondary.)‡

Duration of Sickness, - - 2 years

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, [illegible] M. D.

Date of Certificate, [illegible] 1897.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. October, 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE OF THE CAUSE OF DEATH.

Boston, June 2 189 7

Name and age of deceased: Isadore A. Turner Age 35 yrs. mos. dys.

Date and place of death: 1320 Saratoga St. E Boston

Disease or cause of death: Apoplexy complicated by Brights

Disease

Duration of disease:* Final Stroke 9 hours had previous one 2 yrs before

I certify that the above is true, to the best of my knowledge and belief.

Name and residence of physician. Edward F. Gage M. D

#131 Crest Ave Winthrop

*It is very desirable to be informed of the duration of the disease.

The office of the Board of Health will be open for the granting of permits for burial, as follows:—Saturdays, 9 A. M. till 2 P.M.; Sundays, 10 A.M. till 12 M.; Holidays, from 10 A. M. till 12 M.; other days, from 9 A.M. till 5 P.M.

UNDERTAKER'S RETURN.—Boston.

Date of death, June 21 1897 Name, Isadore A. Turner

Maiden name,* Isadore A. Hand Sex, F

Married, ~~single, or widow~~ of ____ wife of Charles H.

Color, W Age, 38 years, ____ mos., ____ days. Residence, 20 Sturgis st

Place of death (street and number), 20 Sturgis st Winthrop Mass ward ____

Place of birth, Boston Occupation, ____

Name of father, William Maiden name of mother, Mary Hickey

Birthplace of father, England Birthplace of mother, Concord Mass

Place of interment,† East Brookline "Holyhood"

* If a married woman or a widow. † Give the name of the burial ground.

Signature of Undertaker:

Thos. J. Dane

No. ...

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	July 1st 1897
2. Name, ...	Jane Cecelia Robertson
(Maiden Name),* .	
(Name of Husband),*	
3. Sex, and whether single,	Female
Married, or Widowed,	
4. Color,†	White
5. Age, ...	7 Years, 4 Months, 25 Days.
6. Disease or Cause of Death, (Primary and Secondary),‡ Duration of Sickness, .	
By whom certified, .	
7. Residence, ...	Winthrop [illegible]
8. Occupation, ...	
9. Place of Death, . . .	Winthrop (Bad St)
10. Place of Birth, . . .	" "
11. Name of Father, . .	William J
12. Name of Mother, . . (Maiden Name),	Mary Ann Gove
13. Birthplace of Father, .	West Buxton Me
14. Birthplace of Mother, .	New Boston Me
15. Place of Interment, .	Holy Cross Cemetery
Signature of Undertaker ~~or other person~~ making the Return, ...	Sumner Floyd

DATED at Winthrop, on July 3 1897

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Jane C. Robicheau *Age,* 7-4-25

Date and Place of Death,† - died at Winthrop (Read St) July 1, 1897.

Disease or Cause of Death, - *of* Peritonitis
(*Primary and Secondary.*)‡

Duration of Sickness, - - two weeks

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Alexander L. McCormack M.D.

Date of Certificate, July - 2nd 1897.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE OF THE CAUSE OF DEATH.

Boston, July 3rd 189 7

Name and age of deceased: Elizabeth A Hargreaves Age 81 yrs. 2 mos. 13 dys.

Date and place of death: July 3rd 1897 Winthrop Mass

Disease or cause of death: Peritonitis following Typhlitis

Intersusceptin of bowels

Duration of disease:* Five days

I certify that the above is true, to the best of my knowledge and belief.

Name and residence of physician. Horace L Soule M. D.

109 Winthrop St. Winthrop Mass.

* It is very desirable to be informed of the duration of the disease.

The office of the Board of Health will be open for the granting of permits for burial, as follows:—Saturdays, 9 A.M. till 2 P.M.; Sundays, 10 A.M. till 12 M.; Holidays, from 10 A.M. till 12 M.; other days, from 9 A.M. till 5 P.M.

UNDERTAKER'S RETURN.—Boston.

Elizabeth A. Hansom

Date of death, July 3rd 1897 Name, Elizabeth A. Hansom

Maiden name,* Sex, F

Married, ~~single, or widow of~~ wife of Frederick C Hansom

Color, W Age, ~~81~~ 81 years, ~~2~~ 2 mos., ~~13~~ 13 days. Residence, Neptune Avenue

Place of death (street and number), Neptune Ave & Winthrop ward

Place of birth, Berwick Me Occupation,

Name of father, Jared Fells Maiden name of mother, Hannah Foulds

Birthplace of father, Unknown Birthplace of mother, Unknown

Place of interment,† Lynn Pine Grove Cem

* If a married woman or a widow. † Give the name of the burial ground.

Signature of Undertaker: J W Bryant

Commonwealth of Massachusetts.

No.

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	July 9" 1897
2. Name, ...	Jane Crose
(Maiden Name),* .	
(Name of Husband),*	Thomas H. Crose
3. Sex, and whether single,	Female
Married, or Widowed,	Married
4. Color,†	White
5. Age, ...	55 Years, 1 Months, 16 Days.
(Disease or Cause of Death, (Primary and Secondary),‡	
6. Duration of Sickness, .	
(By whom certified, .	
7. Residence, ...	Winthrop Mass
8. Occupation, ...	— O —
9. Place of Death, . . .	Vernon Street
10. Place of Birth, . . .	
11. Name of Father, . .	
12. Name of Mother, . . (Maiden Name),	
13. Birthplace of Father, .	
14. Birthplace of Mother, .	
15. Place of Interment, .	Winthrop Cemetery
Signature of Undertaker ~~or other person~~ making the Return, ...	Sumner Floyd

Dated at Winthrop, on July 10" 1897

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Jane Lorre Age, 55 yr-1 Mo-16 da

Date and Place of Death,† died at Winthrop (Vernon Street) July 9th 1897.

Disease or Cause of Death, (*Primary and Secondary.*)‡ of Secondary cancer of Lt Pleura & mediastinum

Duration of Sickness, Twenty seven months

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Henry L Bowne M.D. 28 Saratoga St E.B.

Date of Certificate, July 11 1897.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896. — 5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

Commonwealth of Massachusetts.

No. .....

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	July 19th 1897
2. Name, ...	Marjorie A. Thompson
(Maiden Name),* .	
(Name of Husband),*	
3. Sex, and whether single,	Female
Married, or Widowed,	
4. Color,†	White
5. Age, ...	1 Years, 10 Months, 2 Days.
6. Disease or Cause of Death, (Primary and Secondary),‡	Dr. E. F. Sage
Duration of Sickness, .	
By whom certified, .	
7. Residence, ...	40 Terrace Ave
8. Occupation, ...	
9. Place of Death, . . .	Winthrop
10. Place of Birth, . . .	Boston
11. Name of Father, . .	John A. Thompson
12. Name of Mother, . . (Maiden Name),	Margaret Thompson
13. Birthplace of Father, .	New York
14. Birthplace of Mother, .	Mount Auburn
15. Place of Interment, .	Sumner Floyd
Signature of Undertaker ~~or other person~~ making the Return, ...	

Dated at Winthrop, on July 19th 1897

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Marjorie A. Thompson ... *Age,* 1 yr 10 mo 2 ds

Date and Place of Death,† - *died at* Winthrop (40 Terrace Ave) July 19" 1897.

Disease or Cause of Death, - *of* Bronchitis followed by Pneumonitis
(Primary and Secondary.)‡

Duration of Sickness, - - Two days

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, C. F. Gage M.D. 71 Central Ave Winthrop

Date of Certificate, July 21 1897.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December. 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE OF THE CAUSE OF DEATH.

Boston, Winthrop July 20 189 7

Name and age of deceased: Rachel Shea Age 59 yrs. — mos. — dys.

Date and place of death: July 19.1897 #34 Beal St. Winthrop

Disease or cause of death: Cancer of Stomach.

*Duration of disease:** Six months.

I certify that the above is true, to the best of my knowledge and belief.

Name and residence of physician. F. E. Johnson M. D.

#75 Winthrop St. Winthrop Mass.

* It is very desirable to be informed of the duration of the disease.

The office of the Board of Health will be open for the granting of permits for burial, as follows: — Saturdays, 9 A.M. till 2 P.M.; Sundays, 10 A.M. till 12 M.; Holidays, from 10 A.M. till 12 M.; other days, from 9 A.M. till 5 P.M.

UNDERTAKER'S RETURN.—Boston.

Date of death, July 19 1897 Name, Rachel Shea

Maiden name,* Rachel Murphy Sex, F.

~~Married, single~~, or widow of Jeremiah Shea ~~wife of~~

Color, White Age, 59 years, — mos. — days. Residence, 347 Read St Mattapan

Place of death (street and number), 344 Read St Westbrook ward

Place of birth, Ireland Occupation. Housewife

Name of father, Michael Murphy Maiden name of mother, Nora Sullivan

Birthplace of father, Ireland Birthplace of mother, Ireland

Place of interment,† Calvary

* If a married woman or a widow. † Give the name of the burial ground.

Signature of Undertaker: John D Morris

July 19

PHYSICIAN'S CERTIFICATE OF THE CAUSE OF DEATH.

Name and age of deceased: Boston, July 25 189 7
Julia H Gunderson Age — yrs. 7 mos. 22 dys.

Date and place of death:
July 25 1897 Winthrop

Disease or cause of death:
Cholera Infantum

*Duration of disease:** 4 days

I certify that the above is true, to the best of my knowledge and belief.

Name and residence of physician.
C E Johnson M. D.
Winthrop Mass

*It is very desirable to be informed of the duration of the disease.

The office of the Board of Health will be open for the granting of permits for burial, as follows: — Saturdays, 9 A.M. till 2 P.M.; Sundays, 10 A.M. till 12 M.; Holidays, from 10 A.M. till 12 M.; other days, from 9 A.M. till 5 P.M.

1897

Pharmacist Certificate
Undertakers
Returns

UNDERTAKER'S RETURN.—Boston.

Date of death, July 25th 1897 Name, Julia H. Gunderson

Maiden name,* Sex, Female

Married, single, or widow of wife of

Color, White Age. — years. 7 mos. 22 days. Residence. 187 Winthrop St

Place of death (street and number), 187 Winthrop St ward

Place of birth, East Boston Occupation. Night Watchman

Name of father, Peter A. Maiden name of mother, Mary Burke

Birthplace of father, Norway Birthplace of mother. Morrison Co

Place of interment,† Holy Cross Malden

*If a married woman or a widow. †Give the name of the burial ground.

Signature of Undertaker: M. J. Kelly

Commonwealth of Massachusetts.

No. .....

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	July 31 1897
2. Name, ...	Dorothy Caroline
(Maiden Name),* .	
(Name of Husband),*	
3. Sex, and whether single,	Female
Married, or Widowed,	
4. Color,†	White
5. Age, ...	Years, 8 Months, 7 Days.
6. Disease or Cause of Death, (Primary and Secondary),‡	Ch Int
Duration of Sickness, .	
By whom certified, .	Stanton
7. Residence, ...	
8. Occupation, ...	
9. Place of Death, . . .	Hartsville
10. Place of Birth, . . .	Hartsville
11. Name of Father, . .	David T. Bates
12. Name of Mother, . . (Maiden Name),	Ella F Kemp
13. Birthplace of Father, .	Tuscumbia
14. Birthplace of Mother, .	Salt Spring
15. Place of Interment, .	Hadley Cemetery
Signature of Undertaker ~~or other person~~ making the Return, . . .	Sumner Floyd

DATED at Hartsville, on July 31 1897.

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Dorothy Collins Age, 8mo 7da

Date and Place of Death,† - *died at* Winthrop, July 31" 1897,

Disease or Cause of Death, - *of* Cholera Infantum
(Primary and Secondary.)‡

Duration of Sickness, - - nine days

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, G. Dawson M.D.

Date of Certificate, July 31 1897.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. October, 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

Commonwealth of Massachusetts.

No. .....

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	August 6" 1897
2. Name, ...	Sophia A Cady
(Maiden Name),* .	[illegible]
(Name of Husband),*	William A Cady
3. Sex, and whether single,	Female
Married, or Widowed,	
4. Color,†	White
5. Age, ...	63 Years, 5 Months, — Days.
6. Disease or Cause of Death, (Primary and Secondary),‡	
Duration of Sickness, .	
By whom certified, .	
7. Residence, ...	Medford (42) Winthrop St
8. Occupation, ...	
9. Place of Death, . . .	Winthrop St Medford
10. Place of Birth, . . .	Rutland Vt
11. Name of Father, . .	[illegible]
12. Name of Mother, . . (Maiden Name),	[illegible]
13. Birthplace of Father, .	[illegible]
14. Birthplace of Mother, .	[illegible]
15. Place of Interment, .	Franklin, Cemetery
Signature of Undertaker ~~or other person~~ making the Return, ...	Samuel Page

DATED at Medford, on Aug 7" 1897

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

Duplicate Certificate

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Sophia A. Cady Age, 63 yr - 5 mos

Date and Place of Death,† - *died at* Winthrop (Shirley Pt) August 6th 1897.

Disease or Cause of Death, - *of* Apoplexy
(Primary and Secondary.)‡

Duration of Sickness, - - Six days

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Edward F. Gage M. D.

Date of Certificate, August 8th 1897.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896. — 5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

Commonwealth of Massachusetts.

No. .....

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	August 7th 1897
2. Name, ...	Charlotte A. Wadleigh
(Maiden Name),* .	Atyeo
(Name of Husband),*	Charles E. Wadleigh
3. Sex, and whether single,	Female
Married, or Widowed,	Wid
4. Color,†	W.
5. Age, ...	53 Years, 1 Months, 2 Days.
(Disease or Cause of Death, (Primary and Secondary),‡	
6. Duration of Sickness, .	Dr E F Kage
(By whom certified, .	
7. Residence, ...	Weymouth Mass.
8. Occupation, ...	Domestic
9. Place of Death, . . .	Weymouth Mass.
10. Place of Birth, . . .	South Boston
11. Name of Father, . .	Geo W. Atyeo
12. Name of Mother, . . (Maiden Name),	
13. Birthplace of Father, .	Quincy Mass.
14. Birthplace of Mother, .	
15. Place of Interment, .	Weymouth Cemetery
Signature of Undertaker ~~or other person~~ making the Return, ...	Sumner Floyd

DATED at Weymouth, on Aug 9th 1897

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Harriette Almira Wadleigh Age, 53-1-2

Date and Place of Death,† - *died at* Winthrop Neptune Ave Aug 8th 189 7,

Disease or Cause of Death, - *of* Heart Disease
(Primary and Secondary.)‡

Duration of Sickness, - - Death followed sudden attack, history of chronic heart disease

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Edw. F. Eaton M.D.
131 Crest Ave Winthrop

Date of Certificate, Aug 9 189 7.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December. 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

Commonwealth of Massachusetts.

No. ...

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

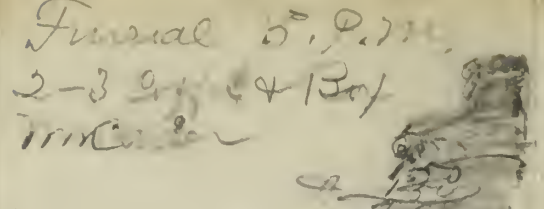
1. Date of Death, . . .	August 10 1897
2. Name, ...	Hester T. Rowe
(Maiden Name),* .	
(Name of Husband),*	
3. Sex, and whether single,	Male
Married, or Widowed,	
4. Color,†	White
5. Age, ...	Years, 5 Months, 14 Days
6. Disease or Cause of Death, (Primary and Secondary),‡ Duration of Sickness, .	Dr Doman
By whom certified, .	
7. Residence, ...	Wind[illegible] Street
8. Occupation, ...	
9. Place of Death, . . .	Over [illegible]
10. Place of Birth, . . .	Attleboro
11. Name of Father, . .	Eli Rowe
12. Name of Mother, (Maiden Name). . .	Mary Ann Raymond
13. Birthplace of Father, .	England
14. Birthplace of Mother, .	[illegible] Foundry
15. Place of Interment, .	North Attleboro
Signature of Undertaker ~~or other person~~ making the Return, ...	Samuel Fuge

DATED at Attleboro, on Aug 10 1897

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

Be very particular to fill all Blanks.

Plate. Ed. Dec., 1896.—5,000



[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Herbert T. Rowe Age, 5 mo 2-14 ds

Date and Place of Death,† - died at Winthrop (Cora St) August 11" 1897,

Disease or Cause of Death, - of Colored Infantile
(*Primary and Secondary.*)‡‡

Duration of Sickness, - - Three days

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, A. B. Dorman M.D.

Date of Certificate, Aug. 11th 1897.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

Commonwealth of Massachusetts.

No. .....

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	Aug 16 1895
2. Name, ...	Ida Nelson Page
(Maiden Name),* .	Nelson
(Name of Husband),*	Edgar L. F.
3. Sex, and whether single,	Female
Married, or Widowed,	Married
4. Color,†	W
5. Age, ...	30 Years, 9 Months, 3 Days.
(Disease or Cause of Death, (Primary and Secondary),‡	
6. Duration of Sickness, .	
(By whom certified, .	
7. Residence, ...	Hartford,
8. Occupation, ...	
9. Place of Death, . . .	[illegible]
10. Place of Birth, . . .	[illegible]
11. Name of Father, . .	[illegible]
12. Name of Mother. . . (Maiden Name),	[illegible]
13. Birthplace of Father, .	[illegible]
14. Birthplace of Mother, .	[illegible]
15. Place of Interment, .	[illegible]
Signature of Undertaker ~~or other person~~ making the Return, ...	[illegible]

DATED at Hartford, . on Aug 17 18 95

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Lura Nelson Gage Age, 30 ye 9m 3 da

Date and Place of Death,† - died at Winthrop, (Cabot Avenue) Aug 16" 189 7,

Disease or Cause of Death, - of Septicaemia + acute valvula
(*Primary and Secondary.*) ‡

Duration of Sickness, - - heart lesion 3 wks

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, F E Johnson MD

Date of Certificate, Aug 18 189 7.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December. 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE OF THE CAUSE OF DEATH.

Boston, Aug 17th 189 7

Name and age of deceased: Rosa McShane Age 10 yrs. mos. dys.

Date and place of death: Aug 17th Winthrop, Mass

Disease or cause of death: ~~Six days~~ Diphtheria

*Duration of disease:** Six days

I certify that the above is true, to the best of my knowledge and belief.

Name and residence of physician. Albert B. Dorman *M. D.*

*It is very desirable to be informed of the duration of the disease.

The office of the Board of Health will be open for the granting of permits for burial, as follows: — Saturdays, 9 A.M. till 2 P.M.; Sundays, 10 A.M. till 12 M.; Holidays, from 10 A.M. till 12 M.; other days, from 9 A.M. till 5 P.M.

UNDERTAKER'S RETURN.—Boston.

Date of death, Aug. 17 1897 Name, Rose A. McDshane

Maiden name,* — Sex, F

~~Married~~, single, ~~or widow of~~ wife of —

Color, W Age, 10 years, mos., days. Residence, Gerald st

Place of death (street and number), Gerald st. Winthrop ward

Place of birth, Winthrop Mass Occupation,

Name of father, Bernard Maiden name of mother, Ann Rogers

Birthplace of father, Ireland Birthplace of mother. Ireland

Place of interment,† "Holy Cross" Malden

*If a married woman or a widow. †Give the name of the burial ground.

Signature of Undertaker: Thos. J. Shane

Commonwealth of Massachusetts.

No. .....

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	Aug 27th 1897
2. Name, ...	Edward Miller Burdick
(Maiden Name),* .	—
(Name of Husband),*	—
3. Sex, and whether single,	Male
Married, or Widowed,	White
4. Color,†	
5. Age, ...	1 Years, — Months, — Days.
(Disease or Cause of Death, (Primary and Secondary),‡	
6. Duration of Sickness, .	10 days
(By whom certified, .	Dr A B Forman
7. Residence, ...	Winthrop
8. Occupation, ...	
9. Place of Death, . . .	Winthrop (Farm Bar Ave)
10. Place of Birth, . . .	Dorchester
11. Name of Father, . .	Henry L Burdick
12. Name of Mother, . . (Malden Name),	Leona Miller
13. Birthplace of Father. .	Moira N.Y.
14. Birthplace of Mother. .	Fort Ann "
15. Place of Interment, .	Winthrop Cemetery
Signature of Undertaker ~~or other person~~ making the Return, ...	Sumner Floyd

DATED at Winthrop, on August 29 1897

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896. — 5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Edward W Burdick *Age,* 1 year

Date and Place of Death,† - *died at* Hartshorn (Tam Bam) Aug 27th 1897.

Disease or Cause of Death, - *of* Inflammatory Diarrhoea
(*Primary and Secondary.*)‡‡

Duration of Sickness, - - Ten days

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, A. B. Dorman, M.D.

Date of Certificate, Aug. 28th 1897.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

Commonwealth of Massachusetts.

No. 1

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death,	August 27th 1897
2. Name,	Jeremy Towle
(Maiden Name),*	
(Name of Husband),*	
3. Sex, and whether single,	Male
Married, ~~or Widowed,~~	
4. Color,†	White
5. Age,	65 Years, X Months, X Days.
Disease or Cause of Death, (Primary and Secondary),‡	Intestinal stricture
6. Duration of Sickness,	Five acute condition 1 wk
By whom certified,	E. Johnson M.D. Winthrop
7. Residence,	Winthrop Mass.
8. Occupation,	Carpenter
9. Place of Death,	4 Read St Winthrop Mass.
10. Place of Birth,	Cohasett Mass.
11. Name of Father,	Jeremy Towle
12. Name of Mother, (Maiden Name).	Unknown
13. Birthplace of Father,	Unknown
14. Birthplace of Mother,	Unknown
15. Place of Interment,	Woodlawn Cemetery
Signature of Undertaker or other person making the Return,	J W Sprague 120 Meridian St E Bston

DATED at Winthrop Mass, on 28th Aug 1897

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

Be very particular to fill all Blanks.

Plate. Ed. Dec., 1896.—5,000

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

(*Fill out in Ink.*) No.....

Return of Death to the City Clerk.

CITY OF SALEM, MASS.

Date of Death, Sept- 15- 1897

Name, Lizzie B. Gladwin

Maiden Name,[1] " " Butman

Sex, Female; ~~Single~~, Married, ~~Widow~~. Color[2] (*if other than white*)

Aged 29 years, months, days

Cause of death,

Residence,[3]—*No.* New York *Street.*

Place of death,—*No.* Winthrop Center *Street.*

Occupation, At Home

Birthplace, Salem Mass.

Name of Father, F. E. Butman

Maiden Name of Mother, Abby E. Church

Birthplace of Father, New Orleans

Birthplace of Mother, Salem

To whom Married, Ellis W. Gladwin

Attending Physician, Dr Burgess

Date of Interment or Removal, Sept- 17 1897

Place of Interment } Ground, Harmony Grove Lot, Salem Mass.
Section, Range, Grave,

Undertaker (signature),

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Lizzie B. Gladwin *Age,* 29 yrs.

Date and Place of Death,† *died at* Winthrop Centre Sept 15 189 7

Disease or Cause of Death, *(Primary and Secondary.)‡* *of* Acute Meningitis

Duration of Sickness, Four days

I certify that the above is true, to my best knowledge and belief.

Signature and Residence of Certifying Physician, O. J. Burgess 339 Broadway Cambridge

Date of Certificate, Sept 16 189

* Or Sex of Infant (not named). If stillborn, so state. † If child died immediately after birth, so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forwith furnish for registration, a certificate stating to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at the birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physcian neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such a certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficent reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose, shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

Commonwealth of Massachusetts.

No. .....

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	Sept 18, 1897
2. Name, ...	Jeremiah Watson
(Maiden Name),* .	
(Name of Husband),*	
3. Sex, and whether single,	male
Married, or Widowed,	Widower
4. Color,†	
5. Age, ...	80 Years, 7 Months, 20 Days.
6. Disease or Cause of Death, (Primary and Secondary),‡ Duration of Sickness, . By whom certified, .	Dr Percy G. Brown
7. Residence, ...	Winthrop
8. Occupation, ...	
9. Place of Death, . . .	Winthrop
10. Place of Birth, . . .	Cornish, Me.
11. Name of Father, . .	Johnathan Watson
12. Name of Mother, . . (Maiden Name),	Joanna Lougee
13. Birthplace of Father, .	Limerick, Maine
14. Birthplace of Mother, .	Parsonsfield, Maine
15. Place of Interment, .	Woodlawn Cemetery
Signature of Undertaker ~~or other person making~~ the Return, ...	Sumner Floyd

DATED at Winthrop, on ~~October~~ September 18 18 .

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Jeremiah Walker *Age,* 80-7-20

Date and Place of Death,† - *died at* Winthrop (Jefferson Avenue) Sept 18 1897,

Disease or Cause of Death, - *of* Euthanasia
(Primary and Secondary.)‡

Duration of Sickness, - -

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Geo. G. Browne M.D. 28 Raleigh

Date of Certificate, Sept 19 1897.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

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Commonwealth of Massachusetts.

No. ...

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . . Sept 24" 97
2. Name, ... [illegible]
   (Maiden Name),* .
   (Name of Husband),* [illegible]
3. Sex, and whether single, F.
   Married, or Widowed,
4. Color,† . . . . . W.
5. Age, ... 70 Years, [illegible] Months, [illegible] Days.
6. (Disease or Cause of Death, (Primary and Secondary),‡
   Duration of Sickness, .
   (By whom certified, .
7. Residence, . . . [illegible]
8. Occupation, ...
9. Place of Death, . . . [illegible]
10. Place of Birth, . . . [illegible]
11. Name of Father, . . [illegible]
12. Name of Mother, . . [illegible]
    (Maiden Name),
13. Birthplace of Father, . [illegible]
14. Birthplace of Mother, . [illegible]
15. Place of Interment, .

Signature of Undertaker ~~or other person~~ making the Return, ... Sumner Floyd

DATED at Waltham, on Sept 25" 1897

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

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PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Jane B Smith Age, 70 yrs

Date and Place of Death,† died at Winthrop (Locust Street) Sept 24 " 1897,

Disease or Cause of Death, (*Primary and Secondary.*)‡ of Heart Disease

Duration of Sickness, Final illness of short duration

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, A. B. Norman, M.D.
Chairman Board of Health

Date of Certificate, Sept 26th 189 .

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. October, 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

No. .....

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	Sept 26 1897
2. Name, ...	Eliza E. Allen
(Maiden Name),* .	Elizabeth Ba
(Name of Husband),*	[illegible]
3. Sex, and whether single,	Female
Married, or Widowed,	Widow
4. Color,†	White
5. Age, ...	53 Years, 4 Months, 19 Days.
6. Disease or Cause of Death, (Primary and Secondary),‡	
Duration of Sickness, .	
By whom certified, .	
7. Residence, ...	Berlin Mass
8. Occupation, ...	
9. Place of Death, . . .	[illegible]
10. Place of Birth, . . .	
11. Name of Father, . .	[illegible]
12. Name of Mother, . . (Maiden Name),	Mary [illegible]
13. Birthplace of Father, .	
14. Birthplace of Mother, .	
15. Place of Interment, .	[illegible]
Signature of Undertaker ~~or other person~~ making the Return, ...	Sumner Floyd

DATED at [illegible], on Sept 28 1897.

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Elizabeth C. Aborn Age, 64 4 19 (Yrs mos dys)

Date and Place of Death,† - *died at* Whitthorp Sept 26 1897,

Disease or Cause of Death, - *of* Cerebral Hemorrhage & Acute Brights Disease
(Primary and Secondary.)‡

Duration of Sickness, - - Two Months

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Edward H. Pyle M.D. 212 Race Street Philadelphia

Date of Certificate, Sept 28 189.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December. 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

No. .....

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	Sept 28 1897
2. Name, ...	Daniel Markell
(Maiden Name),* .	—
(Name of Husband),*	—
3. Sex, and whether single,	Male
Married, or Widowed,	—
4. Color,†	White
5. Age, ...	Years, Months, — Days.
6. Disease or Cause of Death, (Primary and Secondary),‡	
Duration of Sickness, .	
By whom certified, .	
7. Residence, ...	
8. Occupation, ...	—
9. Place of Death, . . .	Read St
10. Place of Birth, . . .	Read St
11. Name of Father, . .	Peter P. Markell
12. Name of Mother, (Maiden Name), . .	Mary A. Markell
13. Birthplace of Father, .	Ireland
14. Birthplace of Mother, .	Ireland
15. Place of Interment, .	Hartford Cemetery
Signature of Undertaker ~~or other person~~ making the Return, . . .	Thomas Hayes

DATED at Hartford, on Sept 28 1897

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or another physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Stillborn Nickell (Daniel) *Age,* ———

Date and Place of Death,† - *died at* Winthrop Sept 28 *189*7,

Disease or Cause of Death, - *of* Still born

(Primary and Secondary.)‡

Duration of Sickness, - -

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Chas. Stocks Metcalf M.D.

Date of Certificate, Sept 28 *189*7.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December. 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

No. .....

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	October - 10" 1897
2. Name, ...	Susan D. B. Webber
(Maiden Name),* .	Susan D. Burgess
(Name of Husband),*	Moses H Webber
3. Sex, and whether single,	Female
Married, or Widowed,	Married
4. Color,†	White
5. Age, ...	72 Years, 1 Month, 13 Days.
6. Disease or Cause of Death, (Primary and Secondary),‡	Mitral Stenosis - Heart failure
Duration of Sickness, .	Six months
By whom certified, .	W. H. Briard M. D.
7. Residence, ...	Winthrop - Mass
8. Occupation, ...	~
9. Place of Death, . . .	Winthrop
10. Place of Birth, . . .	Boston
11. Name of Father, . .	Wm G. Burgess
12. Name of Mother, . . (Maiden Name),	Deborah White [redacted]
13. Birthplace of Father, .	England
14. Birthplace of Mother, .	Braintree - Mass
15. Place of Interment, .	Winthrop Cemetery
Signature of Undertaker ~~or other person~~ *making the Return*, ...	Sumner Floyd

DATED at Winthrop, on Oct 11" 1897

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Susan D. B. Webber Age, 72

Date and Place of Death,† died at Winthrop - Mass. Oct 10" 189 7

Disease or Cause of Death, (*Primary and Secondary.*)‡ of Mitral Stenosis - Heart Failure

Duration of Sickness, Six months

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, W. H. Briard M. D.

Date of Certificate, Oct 10" 189 7.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. October, 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

Commonwealth of Massachusetts.

No. .....

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	Oct 31, 97 - 10 P.M.
2. Name, ...	Gladys Evelyn Turner
(Maiden Name),* .	
(Name of Husband),*	
3. Sex, and whether single,	Female single
Married, or Widowed,	
4. Color,†	White
5. Age, ...	14 Years, 9 Months, 6 Days.
6. Disease or Cause of Death, (Primary and Secondary),‡	Pneumonia
Duration of Sickness, .	
By whom certified, .	
7. Residence, ...	20 Cottage St Rear Winthrop
8. Occupation, ...	
9. Place of Death, . . .	Winthrop
10. Place of Birth, . . .	Revere Mass
11. Name of Father, . .	Edward P. Turner
12. Name of Mother, . . (Maiden Name),	Celia I Lanier
13. Birthplace of Father, .	Nashua N.H.
14. Birthplace of Mother, .	Charleston S.C.
15. Place of Interment, .	Melrose Mass
Signature of Undertaker ~~or other person~~ making the Return, .	Sumner Floyd

DATED at Winthrop, on October 31 1897

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Gladys Evelyn Morse Age, 14-9-6

Date and Place of Death,† - *died at* Winthrop (Cor. Park Road), Oct 31 1897.

Disease or Cause of Death, - *of* Pulmonary Tuberculosis
(Primary and Secondary.)‡

Duration of Sickness, - - Six months.

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, [illegible]

Date of Certificate, Nov 2 1897.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896. — 5,000

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

No. .....

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	December 13 18[illegible]
2. Name, ...	Elizabeth [illegible]
(Maiden Name),* .	[illegible] Gadbois
(Name of Husband),*	[illegible]
3. Sex, and whether single,	Female
Married, or Widowed,	Married
4. Color,†	White
5. Age, ...	33 Years, — Months, — Days.
6. Disease or Cause of Death, (Primary and Secondary),‡	[illegible]
Duration of Sickness, .	[illegible]
By whom certified, .	[illegible]
7. Residence, ...	[illegible]
8. Occupation, ...	[illegible]
9. Place of Death, . . .	[illegible]
10. Place of Birth, . . .	[illegible]
11. Name of Father, . .	[illegible]
12. Name of Mother, . . (Maiden Name),	[illegible]
13. Birthplace of Father, .	[illegible]
14. Birthplace of Mother, .	[illegible]
15. Place of Interment, .	[illegible]
Signature of Undertaker or other person making the Return, ...	[illegible]

DATED at [illegible], on Dec 13 18[illegible]

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Elizabeth Jennings Age, 33 years

Date and Place of Death,† - *died at* Winthrop (Shirley Street) Dec 13th 1897.

Disease or Cause of Death, - *of* Lingual Shock after
(Primary and Secondary.)‡

Duration of Sickness, - - Operation.

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, E. Brinson M.D.

Date of Certificate, Dec 5 1897.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

Commonwealth of Massachusetts.

No. .....

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	..... 15 1897
2. Name, ...	..... Clara Healy Hunt
(Maiden Name),* .	..... ~
(Name of Husband),*	..... ~
3. Sex, and whether single,	..... Female
Married, or Widowed,	..... Married
4. Color,†	..... White
5. Age, ...	..... 46 Years, 3 Months, 22 Days.
6. Disease or Cause of Death, (Primary and Secondary),‡	..... Acute
Duration of Sickness, .	.....
By whom certified, .	.....
7. Residence, ...	.....
8. Occupation, ...	..... Editress
9. Place of Death, . . .	.....
10. Place of Birth, . . .	.....
11. Name of Father, . .	..... Alonzo Hunt
12. Name of Mother, . . (Maiden Name),	..... Roxanna Buckley
13. Birthplace of Father, .	..... Canada
14. Birthplace of Mother, .	.....
15. Place of Interment, .	..... Whitefield
Signature of Undertaker ~~or other person~~ making the Return, ...	.....

DATED at Whitefield, on Dec 16 18 97.

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Charles Wesley Hunt Age, 48-3-22

Date and Place of Death,† died at Winthrop, (Fremont Street) Dec 15 1897,

Disease or Cause of Death, of Aortic Regurgitation, Cardiac Dilatation
(Primary and Secondary.)‡

Duration of Sickness, Two years

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Ben Hicks Metcalf

Date of Certificate, Dec 17/97 189 .

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. October, 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

Commonwealth of Massachusetts.

No. .....

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	December 21" 1897
2. Name, ...	Mary H. Ford
(Maiden Name),* .	[illegible]
(Name of Husband),*	[illegible]
3. Sex, and whether single,	Female
Married, or Widowed,	Married
4. Color,†	White
5. Age, ...	59 Years, 8 Months, 6 Days.
Disease or Cause of Death, (Primary and Secondary),‡	
6. Duration of Sickness, .	
By whom certified, .	Dr [illegible]
7. Residence, ...	[illegible]
8. Occupation, ...	[illegible]
9. Place of Death, . . .	[illegible]
10. Place of Birth, . . .	[illegible]
11. Name of Father, . .	[illegible]
12. Name of Mother, . . (Maiden Name).	[illegible]
13. Birthplace of Father, .	[illegible]
14. Birthplace of Mother, .	[illegible]
15. Place of Interment, .	[illegible]
Signature of Undertaker ~~or other person~~ making the Return, ...	[illegible]

DATED at [illegible], on [illegible] 22 18 .

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224: Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Mary L. Fink — Age, 59-8-6

Date and Place of Death,† — *died at* Fairfield Ave. Hosp. Dec. 21 189 ~,

Disease or Cause of Death, — *of* Apoplexy

(Primary and Secondary.)‡

Duration of Sickness, — Fell struck upon — no sick.

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, [illegible]

Date of Certificate, Dec-23 189 ~.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December. 1896. — 5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

No.

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . . January 11th 1896
2. Name, ... Ephraim C Dver
   (Maiden Name),* . —
   (Name of Husband),* —
3. Sex, and whether single, Male
   Married, or Widowed, Married
4. Color,† . . . . . White
5. Age, ... 61 Years, ~ Months, ~ Days.
6. Disease or Cause of Death, (Primary and Secondary),‡
   Duration of Sickness, .
   By whom certified, .
7. Residence, ... [illegible]
8. Occupation, ... [illegible]
9. Place of Death, . . . [illegible]
10. Place of Birth, . . [illegible]
11. Name of Father, . . [illegible]
12. Name of Mother, . . [illegible]
    (Maiden Name),
13. Birthplace of Father, . [illegible]
14. Birthplace of Mother, .
15. Place of Interment, . [illegible]

Signature of Undertaker ~~or other person~~ making the Return, ...

DATED at [illegible] . on [illegible] 11th 18[illegible]

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Nehemiah C. Lyons Age, 61 years

Date and Place of Death,† - *died at* Winthrop (Beach Road) Jan 11th 1898.

Disease or Cause of Death, - *of* Renal retention and Cardiac weakness
(*Primary and Secondary.*)‡‡

Duration of Sickness, - - consequent upon Alcoholism.

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Edward F. Cage M.D.

Date of Certificate, Jan 14 1898.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his deccase; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

Commonwealth of Massachusetts.

No. .....

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	January 13th 1898
2. Name, ...	Thomas D. Miller
(Maiden Name),* .	
(Name of Husband),*	
3. Sex, and whether single,	Male
Married, or Widowed,	
4. Color,†	White
5. Age, ...	Years, — Months, 3 Days.
(Disease or Cause of Death, (Primary and Secondary),‡	
6. Duration of Sickness, .	
(By whom certified, .	
7. Residence, ...	Winthrop, Mass.
8. Occupation, ...	
9. Place of Death, . . .	Pauline Street
10. Place of Birth, . . .	Pauline Street
11. Name of Father, . .	Thomas D. Miller Revere
12. Name of Mother, . . (Maiden Name),	Louise D. Miller
13. Birthplace of Father, .	Dorchester
14. Birthplace of Mother, .	Boston
15. Place of Interment, .	Winthrop, Cemetery
Signature of Undertaker ~~or other person~~ making the Return, ...	Lucius Floyd

DATED at Winthrop, on January 13 1898

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896. — 5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Thomas I. Miller *Age,* 3 Days

Date and Place of Death,† - *died at* Winthrop (Pauline St) Jan 13" 1898,

Disease or Cause of Death, - *of* Intestinal obstruction
(Primary and Secondary.)‡

Duration of Sickness, - - Twelve hours

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, A. B. Donegan

Date of Certificate, Jan 14th 1898.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed December, 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

[*Public Statutes, Chapter 32, as amended by Acts of 1883, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

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UNDERTAKER'S RETURN. ~~Boston.~~ Winthrop

Date of death, Jan 25th 1898 Name, George W Young

Maiden name,* Sex Male

~~Married, single~~, or widow of Widower wife of

Color, W Age, 75 years, 6 mos. days. Residence, Winthrop Mass.

Place of death (street and number), 74 Bowdoin St Winthrop Mass ward

Place of birth, Thomaston Maine Occupation, Carpenter

Name of father, John Young Maiden name of mother, Mary Byers.

Birthplace of father, Unknown Birthplace of mother, Unknown

Place of interment,† .....

*If a married woman or a widow. †Give the name of the burial ground.

Signature of Undertaker: J W Sprague

Commonwealth of Massachusetts

CERTIFICATE OF DEATH

FROM THE RECORDS OF DEATHS IN THE
TOWN OF WINTHROP, MASSACHUSETTS

Date of Death:	January 25, 1898
Name:	George W. Young
(Maiden Name):	
Sex, Color and if Single:	Male
Married or Widowed:	Widowed
Color:	White
Age:	75 years, 6 months
Disease or Cause of Death:	Apoplexy
Residence:	Winthrop, Massachusetts
Occupation:	Carpenter
Place of Death:	74 Bowdoin Street, Winthrop, Massachusetts
Place of Birth:	Thomaston, Maine
Name of Husband or Wife:	
Name of Father:	John Young
Maiden Name of Mother:	Mary Byers
Birthplace of Father:	Unknown
Birthplace of Mother:	Unknown
Place of Interment:	
Date of Record:	June 26, 1898
Registration No.:	4

I, the undersigned, hereby certify that I am clerk of the Town of Winthrop; that as such I have custody of the records of births required by law to be kept in my office.

And I do hereby certify that the forgoing is a true copy from said records.

Witness my hand and seal of said Town of Winthrop on this 6th day of Fe4bruary 2013

Carla Vitale, Town Clerk

PHYSICIAN'S CERTIFICATE OF THE CAUSE OF DEATH.

Winthrop ~~Boston~~, Jan 26th 1898

Name and age of deceased: George H Young Age 75 yrs. 6 mos. dys.

Date and place of death Jan 25th 1898. No 74 Bowdoin St Winthrop Mass

Disease or cause of death: Apoplexy

*Duration of disease:** Six days

I certify that the above is true, to the best of my knowledge and belief.

Name and residence of physician. C. E. Johnson M. D

Jan 26 1898

*It is very desirable to be informed of the duration of the disease.

The office of the Board of Health will be open for the granting of permits for burial, as follows: — Saturdays, 9 A.M. till 2 P.M.; Sundays, 10 A.M. till 12 M. Holidays, from 10 A.M. till 12 M.; other days, from 9 A.M. till 5 P.M.

Commonwealth of Massachusetts.

No. 9 — 1

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	January 27 1895
2. Name, ...	Edward O. Foss
(Maiden Name),* .	—
(Name of Husband),*	—
3. Sex, and whether single,	Male
Married, or Widowed,	Married
4. Color,†	White
5. Age, ...	70 Years, 1 Months, 2 Days.
(Disease or Cause of Death, (Primary and Secondary),‡	
6. Duration of Sickness, .	
(By whom certified, .	
7. Residence, ...	Winthrop Mass.
8. Occupation, ...	Builder
9. Place of Death, . . .	Atwood House
10. Place of Birth, . . .	Waterville Me.
11. Name of Father, . .	Orrin Foss
12. Name of Mother, . . (Maiden Name),	Mary D. Thayer
13. Birthplace of Father, .	
14. Birthplace of Mother, .	Farmington Me
15. Place of Interment, .	Winthrop Cemetery
Signature of Undertaker ~~or other person~~ *making the Return*, ...	[illegible] Roy

DATED at Winthrop, on January 28th 1895

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** George C. Stanley Age, 42-9-9

Date and Place of Death,† - *died at* Winthrop (Almont St) Jan 27th 1898,

Disease or Cause of Death, - *of* Tuberculosis of the Lungs
(Primary and Secondary.)‡

Duration of Sickness, - - Ten months

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, A. B Dorman Med.

Date of Certificate, Jan 30th 1898.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December. 1896.—5,000.

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE OF THE CAUSE OF DEATH.

Boston, Jan 29th 1898.

Name and age of deceased: John Leightbody Age 78 yrs. mos. dys.

Date and place of death: Jan 29th 1898. No 10 Center St Winthrop Mass.

Disease or cause of death: Senility

*Duration of disease:** .....

I certify that the above is true, to the best of my knowledge and belief.

Name and residence of physician. E. Lozier M. D

Jan 29 98

*It is very desirable to be informed of the duration of the disease.

The office of the Board of Health will be open for the granting of permits for burial, as follows:—Saturdays, 9 A.M. till 2 P.M.; Sundays, 10 A.M. till 12 M. Holidays, from 10 A.M. till 12 M.; other days, from 9 A.M. till 5 P.M.

UNDERTAKER'S RETURN. ~~Boston.~~ Winthrop

Date of death, Jan 29th 1898 Name, John Lightbody

Maiden name,* Sex, Male

~~Married, single, or widow of~~ Widower ~~wife of~~

Color, W Age, 78 years, mos. days. Residence, Winthrop Mass

Place of death (street and number), No 10 Center St Winthrop mass. ward

Place of birth, Newyork N Y Occupation, Ship Carpenter

Name of father James Lightbody Maiden name of mother Mary Mc Lean

Birthplace of father, Ireland Birthplace of mother, Londonderry

Place of interment,† East-Boston Cemetery

*If a married woman or a widow. †Give the name of the burial ground.

Signature of Undertaker: J V Sprague

PHYSICIAN'S CERTIFICATE OF THE CAUSE OF DEATH.

Boston, Feb 8th 189 8

Name and age of deceased: Edward F. Rollins Age 69 yrs. 7 mos. 26 dys.

Date and place of death: Feb 6 1898 Memorial Ave Winthrop Mass

Disease or cause of death: Bronchitis accompanied by pulmonary oedema and cardiac degeneration. (Alcoholic Habit)

Duration of disease: * In severe form (five days) preceded by gradual decline for some four months.

I certify that the above is true, to the best of my knowledge and belief.

Name and residence of physician. Edward F. Gage M. D
#131 Court St. Winthrop Mass

*It is very desirable to be informed of the duration of the disease.

The office of the Board of Health will be open for the granting of permits for burial, as follows:—Saturdays, 9 A.M. till 2 P.M.; Sundays, 10 A.M. till 12 M. Holidays, from 10 A.M. till 12 M.; other days, from 9 A.M. till 5 P.M.

UNDERTAKER'S RETURN.—Boston.

Date of death, February 6th 1898 Name, Edward F. Rollins

Maiden name,* ——— Sex, Male

Married, single, or widow of ——— wife of ———

Color, White Age, 69 years, 4 mos., 26 days. Residence, Mermaid Ave Winthrop

Place of death (street and number), Mermaid Ave ward ———

Place of birth, Randolph Vt. Occupation, Hotel Proprietor

Name of father, Edward Maiden name of mother,

Birthplace of father, Birthplace of mother,

Place of interment,† Ashburnham (Old Cemetery)

*If a married woman or a widow. †Give the name of the burial ground.

Signature of Undertaker: Arthur W. Sanborn

No.

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	February 10" 1898.
2. Name, ...	Jessie Thomas Perry
(Maiden Name),* .	
(Name of Husband),*	
3. Sex, and whether single,	F.
Married, or Widowed,	
4. Color,†	White
5. Age, ...	Years, 2 Months, 10 Days
(Disease or Cause of Death, (Primary and Secondary),‡	
6. Duration of Sickness, .	
(By whom certified, .	
7. Residence, ...	Winthrop Mass
8. Occupation, ...	
9. Place of Death, . . .	Pauline St Winthrop Mass
10. Place of Birth, . . .	Winthrop Mass
11. Name of Father, . .	Job Perry
12. Name of Mother, . . (Maiden Name).	Sarah England
13. Birthplace of Father, .	East Boston
14. Birthplace of Mother, .	England
15. Place of Interment, .	Winthrop Cemetery
Signature of Undertaker ~~or other person~~ making the Return, ...	Sumner Floyd

DATED at Winthrop, on Feb 11 1898

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Jessie Thomas Perry *Age,* 2 Mos 10 ds

Date and Place of Death,† - *died at* Winthrop (Pauline Street) Feb 10" 1898.

Disease or Cause of Death, - *of* Heart disease
(*Primary and Secondary.*)‡

Duration of Sickness, - -

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Horace Jones MD Winthrop

Date of Certificate, Feb 12" 1898.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

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Commonwealth of Massachusetts.

No. ....

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . . February 23" 1895
2. Name, ... William Shepard
   (Maiden Name),* .
   (Name of Husband),* —
3. Sex, and whether single, Male
   Married, or Widowed, Married
4. Color,† . . . . . White
5. Age, ... 79 Years. 2 Months, 8 Days.
6. (Disease or Cause of Death, (Primary and Secondary),‡
   Duration of Sickness, .
   (By whom certified, .
7. Residence. . . . . [illegible]
8. Occupation, ... [illegible]
9. Place of Death, . . . [illegible]
10. Place of Birth, . . . Raynham Mass.
11. Name of Father, . . [illegible]
12. Name of Mother, . .
    (Maiden Name),
13. Birthplace of Father, .
14. Birthplace of Mother, .
15. Place of Interment, . [illegible]

Signature of Undertaker ~~or other person~~ making the Return, ... Summer Floyd

DATED at Whitman, on Feby 23" 1895

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896. — 5,000.

Friday 2-2. Hon
Ch 15.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** William Shepard Age, 79-2-8

e and Place of Death,† - *died at* Winthrop February 22 " 189 8,

isease or Cause of Death, - *of* Interstitial Nephritis (Chronic Brights Disease)
(Primary and Secondary.)‡‡

ration of Sickness, - - Five weeks Was the duration of final Sickness.

I certify that the above is true, to the best of my knowledge and belief.

ture and Residence of Certifying Physician, A. B. Dorman

Date of Certificate, Feb. 24 th 1898.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896. — 5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

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SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

Commonwealth of Massachusetts.

No. ...

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	March 9
2. Name, ...	
(Maiden Name),* .	
(Name of Husband),*	
3. Sex, and whether single,	
Married, or Widowed,	
4. Color.†	
5. Age, ...	41 Years, 6 Months, 4 Days.
(Disease or Cause of Death, (Primary and Secondary),‡ 6. Duration of Sickness, .	
(By whom certified, .	
7. Residence, ...	
8. Occupation, ...	
9. Place of Death, . . .	
10. Place of Birth, . . .	
11. Name of Father, . .	
12. Name of Mother, . . (Maiden Name),	
13. Birthplace of Father, .	
14. Birthplace of Mother, .	
15. Place of Interment. .	
Signature of Undertaker ~~or other person~~ making the Return, ...	

DATED at ..., on March 11 18 .

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter .*

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall carry in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Ruth Emma Wyman — *Age,* 4 yrs – 6 m – 4 ds

Date and Place of Death,† — *died at* Whitney, March 9" ; 189 8 ,

Disease or Cause of Death, — *of* Acute Lobar Pneumonia
(*Primary and Secondary.*)‡

Duration of Sickness, — Two weeks.

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Brainard A Andrews M D

Beechmont — *Date of Certificate,* May 11th 189 8.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896. — 5,000

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

Commonwealth of Massachusetts.

No. .....

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	March 16-1896
2. Name, ...	Carrie C. Bette Case made Merrill
(Maiden Name),* .	
(Name of Husband),*	Elijah
3. Sex, and whether single,	Female
Married, or Widowed,	Married
4. Color,†	White
5. Age, ...	65 Years, 4 Months, 24 Days.
(Disease or Cause of Death, (Primary and Secondary),‡	
6. Duration of Sickness, .	Dr Potter
(By whom certified, .	
7. Residence, ...	Whitman Mass
8. Occupation, ...	
9. Place of Death, . . .	Died Heat
10. Place of Birth, . . .	Bridgewater Mass
11. Name of Father, . .	Isaac Merrill
12. Name of Mother, . . (Maiden Name),	Louisa Bonney
13. Birthplace of Father, .	Bridgewater Mass
14. Birthplace of Mother, .	Bridgewater Mass
15. Place of Interment, .	
Signature of Undertaker ~~or other person~~ making the Return, ...	Sumner Fuller

DATED at Whitman, on Mar 16th 1896

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Carrie Cora Betts Age, 65-4-24

Date and Place of Death,† - died at Winthrop Beach, Mar. 16th 1898,

Disease or Cause of Death, - of Lobular pneumonia.
(Primary and Secondary.)‡

Duration of Sickness, - - 7 days

I certify that the above is true to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Wm J. Porter, M.D. Winthrop

Date of Certificate, Mar. 16th 1898.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

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No. .....

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	March 19" 1898
2. Name, ...	Lynette S. Bacon
(Maiden Name),* .	
(Name of Husband),*	
3. Sex, and whether single,	Female
Married, or Widowed,	
4. Color,†	White
5. Age, ...	12 Years, 1 Month, 1 Day.
Disease or Cause of Death, (Primary and Secondary),‡ 6. Duration of Sickness, .	1 C & O C, Johnson
By whom certified, .	
7. Residence, ...	Winthrop Mass
8. Occupation, ...	
9. Place of Death, . . .	66, Washington Avenue
10. Place of Birth, . . .	Nantucket Mass
11. Name of Father, . .	John R. Bacon
12. Name of Mother, . . (Maiden Name),	Clara C. Cook
13. Birthplace of Father, .	Wellesboro Penn
14. Birthplace of Mother, .	Nantucket Mass
15. Place of Interment, .	Winthrop Cemetery
Signature of Undertaker ~~or other person~~ *making the Return*, ...	Sumner Floyd

DATED at Winthrop, on March 19 1898

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Lunette S. Bacon *Age,* 12-1-1

Date and Place of Death,† - *died at* Winthrop, Wash. *on* March 19 *189*8,

Disease or Cause of Death, - *of* Cerebro-spinal Meningitis.
(Primary and Secondary.)‡

Duration of Sickness, - - 4 days

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, E. Emerson, M.D.

Date of Certificate, March 20 *189*8.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1898.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

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No. ...

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	March 23" 1895
2. Name, ...	John Lincoln Sawyer
(Maiden Name),* .	
(Name of Husband),*	
3. Sex, and whether single,	Male
Married, or Widowed,	Married
4. Color,†	White
5. Age, ...	67 Years, 6 Months, 5 Days.
(Disease or Cause of Death, (Primary and Secondary),‡	
6. Duration of Sickness, .	
(By whom certified, .	
7. Residence, ...	Winthrop Mass
8. Occupation, ...	Carpenter
9. Place of Death, . . .	Winthrop Mass
10. Place of Birth, . . .	Portland Me
11. Name of Father, . .	Paul Sawyer
12. Name of Mother, . . (Maiden Name),	Lydia Lake
13. Birthplace of Father, .	Portland Me
14. Birthplace of Mother, .	
15. Place of Interment, .	Winthrop Cemetery
Signature of Undertaker ~~or other person~~ making the Return, ...	[illegible]

DATED at Winthrop, on March 24 1895

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

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Special Act #330

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** John Lincoln Sawyer ..... *Age,* 67-6-5

Date and Place of Death,† - *died at* Winthrop (Pauline Street) Mar 23" *1898*,

Disease or Cause of Death, - *of* Apoplexy
(Primary and Secondary.)‡

Duration of Sickness, - - 2 days

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, B. F. Metcalf M.D

Date of Certificate, Mch 25 *189*.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December. 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

No. ...

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	Mar 1 '21
2. Name, ...	[illegible] E. [illegible]
(Maiden Name),* .	[illegible]
(Name of Husband),*	Hall [illegible]
3. Sex, and whether single,	F [illegible]
Married, or Widowed,	[illegible]
4. Color,†	White Dem 14
5. Age, ...	27 Years, 9 Months, 17 Days.
(Disease or Cause of Death, (Primary and Secondary),‡ 6. Duration of Sickness, .	
(By whom certified, .	
7. Residence, ...	[illegible]
8. Occupation, ...	[illegible]
9. Place of Death, . . .	[illegible]
10. Place of Birth, . . .	[illegible]
11. Name of Father, . .	Arthur [illegible]
12. Name of Mother, . . (Maiden Name),	[illegible] E. [illegible]
13. Birthplace of Father, .	[illegible]
14. Birthplace of Mother, .	[illegible]
15. Place of Interment, .	[illegible]
Signature of Undertaker ~~or other person~~ making the Return, ...	[illegible]

Dated at [illegible], on [illegible] 21 18 .

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Julia E. Merrill Age, 27-9-17

Date and Place of Death,† died at Winthrop (Taylor Street) Mar. 31 1898.

Disease or Cause of Death, (*Primary and Secondary.*)‡ of Chronic Diarrhoea

Duration of Sickness, Between four and five yrs. Last Sickness five days.

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, A. B. Dorman, M.D.

Date of Certificate, April 2d 1898.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion

Plate. Ed. December, 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	April 11 1898
2. Name, ...	Ezra Patten Raymond
(Maiden Name),* .	
(Name of Husband),*	
3. Sex, and whether single,	Male
Married, or Widowed,	married
4. Color,†	White
5. Age, ...	53 Years, 3 Months, 26 Days.
(Disease or Cause of Death, (Primary and Secondary),‡	
6. Duration of Sickness, .	Dr Johnson
(By whom certified, .	
7. Residence, ...	Winthrop Mass
8. Occupation, ...	Mariner
9. Place of Death, . . .	18 Reddy Court
10. Place of Birth, . . .	[illegible]
11. Name of Father, . .	Benjamin
12. Name of Mother, . . (Maiden Name).	Mary
13. Birthplace of Father, .	[illegible]
14. Birthplace of Mother, .	[illegible]
15. Place of Interment, .	[illegible]
Signature of Undertaker ~~or other Person~~ making the Return, ...	Sumner Floyd

DATED at Winthrop, on April 11th 1898

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** - Enos Patten Raymond Age, 53-3-26

Date and Place of Death,† - died at Winthrop (18 Reddy Street.) April 11th 1898.

Disease or Cause of Death, - of General Debility

(Primary and Secondary.)‡

Duration of Sickness, - - Ill 4 hrs

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, E. E. Johnson MD

Date of Certificate, April 12 1898.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

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No. ...

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	April 23rd 1 M
2. Name, ...	Annie Parker
(Maiden Name),* .	Pack
(Name of Husband),*	John McG Parker
3. Sex, and whether single,	Female
Married, or Widowed,	Widow
4. Color,†	White
5. Age, ...	44 Years, 8 Months, 4 Days.
(Disease or Cause of Death, (Primary and Secondary),‡	Pneumonia
6. Duration of Sickness, .	
(By whom certified, .	
7. Residence, ...	Hartford Mass
8. Occupation, ...	
9. Place of Death, . . .	Putnam Mass
10. Place of Birth, . . .	East Boston Mass
11. Name of Father, . .	William Armstrong
12. Name of Mother, . . (Maiden Name).	Mary Jane Armstrong
13. Birthplace of Father, .	Belfast Ireland
14. Birthplace of Mother, .	Braintree Mass
15. Place of Interment, .	Hartford Cemetery
Signature of Undertaker ~~or other person~~ making the Return, ...	Dunnell Fogg

DATED at Hartford, on April 25 18 8.

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000

10 x 15

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

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SECTION 5. No undertaker, sextou or other person shall bury in a city or town or remove therefrom a human body unless he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or a physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*...me and Age of Deceased,** Annie Parker Wife of Naught Age, 44-8-4

...and Place of Death,† - *died at* Winthrop April 23" 1898,

...ease or Cause of Death, - *of* Pneumonia

... (Primary and Secondary.)‡

...uration of Sickness, - - 5 days

I certify that the above is true, to the best of my knowledge and belief.

...nature and Residence of Certifying Physician, Horace J Soule M. D

Date of Certificate, April 25 1898.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

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No. .....

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	Dec 28th 1895
2. Name, ...	Ruth N. Gale
(Maiden Name),* .	
(Name of Husband),*	
3. Sex, and whether single, Married, or Widowed,	Female
4. Color, ...	Black
5. Age, ...	Years, 7 Months, 27 Days.
(Disease or Cause of Death, (Primary and Secondary),† 6. Duration of Sickness, . (By whom certified, .	
7. Residence, ...	Hartford Conn
8. Occupation, ...	
9. Place of Death, . . .	Bed of Rose Hartford Conn
10. Place of Birth, . . .	Hartford Conn
11. Name of Father, . .	William Gale
12. Name of Mother, . . (Maiden Name),	Ida E. Brown
13. Birthplace of Father, .	Washington D C
14. Birthplace of Mother, .	Talbot M C
15. Place of Interment, .	Hartford Cemetery
Signature of Undertaker ~~or other person~~ making the Return, ...	Lucius Boyd

DATED at Hartford, on April 27 1896.

* If a Married Woman or Widow. † If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

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PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Ruth W. Shorts Age, 7mos -27ds

Date and Place of Death,† - died at Winthrop (Beach Road) April 28 1898,

Disease or Cause of Death, - of Meningitis

Duration of Sickness, - -

(Primary and Secondary.)‡

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Elvira A. Page

Date of Certificate, April 29 189 (.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

No.

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death,	May 9" 1898
2. Name,	Luther Hector Chase
(Maiden Name),*	
(Name of Husband),*	
3. Sex, and whether single, Married, or Widowed,	Male Married
4. Color.†	White
5. Age,	54 Years, 0 Months, 1 Days.
(Disease or Cause of Death, (Primary and Secondary),‡	
6. Duration of Sickness,	
(By whom certified,	Dr H. J Soule
7. Residence,	Winthrop Mass
8. Occupation,	Carriage Painter
9. Place of Death,	Elm Tree Street (Off Pleasant)
10. Place of Birth,	West Newbury (Mass)
11. Name of Father,	Luther R. Chase
12. Name of Mother, (Maiden Name),	Lucy D. Follimebee
13. Birthplace of Father,	Newburyport Mass
14. Birthplace of Mother,	West Newbury Mass
15. Place of Interment,	Winthrop (Mass)
Signature of Undertaker ~~or other person~~ *making the Return*,	Sumner Floyd

DATED at Winthrop, on May 10" 1898

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000.

Chase 2.71

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Luther Preston Chase Age, 54 yrs 1 day

Date and Place of Death,† - died at Winthrop (Off Elm Tree St) May 9" 1898,

Disease or Cause of Death, (*Primary and Secondary.*)‡ - of Tuberculosis

Duration of Sickness, - - over a year

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician,

Date of Certificate, 189 .

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December. 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death,	May 17 " 189
2. Name,	Mary A. Buckley
(Maiden Name),*	Calahan
(Name of Husband),*	John J Buckley
3. Sex, and whether single,	Female
Married, or Widowed,	Married
4. Color,†	White
5. Age,	26 Years, 11 Months, 7 Days.
6. Disease or Cause of Death, (Primary and Secondary),‡	
Duration of Sickness,	
By whom certified,	Dr Plummer.
7. Residence,	Fremont Street
8. Occupation,	
9. Place of Death,	Fremont Street
10. Place of Birth,	Ireland
11. Name of Father,	Daniel
12. Name of Mother, (Maiden Name),	Ann Riley
13. Birthplace of Father,	England
14. Birthplace of Mother,	Ireland
15. Place of Interment,	Holy Cross Cemetery
Signature of Undertaker ~~or other person~~ making the Return,	Furniss Floyd

DATED at Winthrop, on May 17" 189x

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

Permit — Phthisis Pulmonalis

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Mary A Buckley. *Age,* 27

Date and Place of Death,† - *died at* Winthrop May 17th *1898*,

Disease or Cause of Death, - *of* Phthisis Pulmonalis
(Primary and Secondary.)‡

Duration of Sickness, - - 3 mos

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Henry L Plummer M D

Date of Certificate, May 17th *1898*.

* Or Sex of Infant (not named). If stillborn so state. † If child lied immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

No. .....

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	May 26th 1898
2. Name, ...	Charles Loring Barrow
(Maiden Name),* .	
(Name of Husband),*	
3. Sex, and whether single,	Male
Married, or Widowed,	Married
4. Color,†	White
5. Age, ...	50 Years, 2 Months, 22 Days.
(Disease or Cause of Death, (Primary and Secondary),‡	
6. Duration of Sickness, .	Dr Andrew
(By whom certified, .	
7. Residence, ...	Hartford Conn
8. Occupation, ...	Spring Maker
9. Place of Death, . . .	Hartford Conn
10. Place of Birth, . . .	East Windsor Conn
11. Name of Father, . .	Charles
12. Name of Mother, . . (Maiden Name),	Susan Gordon
13. Birthplace of Father, .	Hartford Conn
14. Birthplace of Mother, .	East Windsor Hill Conn
15. Place of Interment, .	Fairfield Conn.
Signature of Undertaker ~~or other person~~ making the Return, ...	Simmons Floyd

DATED at Hartford, on May 27 1898

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White, (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

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SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Charles Loring Barrows Age, 50 yrs 2 mos 22 ds

Date and Place of Death,† - died at Winthrop, May 29, 1898,

Disease or Cause of Death, - of Accident, fractured ribs penetrating lungs
(*Primary and Secondary.*)‡

Duration of Sickness, - - Hemorrhage into lungs. 6 hours

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Brainard A Andrews MD

Date of Certificate, May 29th 1898.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

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PHYSICIAN'S CERTIFICATE OF THE CAUSE OF DEATH.

Boston, June 11' 189 8.

Name and age of deceased: Clarion F. Brown Age — yrs. 4 mos. 15 dys.

Date and place of death: June 11'98. — # 90 Pleasant St. Winthrop

Disease or cause of death: Valvular Disease of Heart.

*Duration of disease:** 4 Mos.

I certify that the above is true, to the best of my knowledge and belief.

Name and residence of physician. A. L. Sallaway M. D.
90 Boston

*It is very desirable to be informed of the duration of the disease.

The office of the Board of Health will be open for the granting of permits for burial, as follows: — Saturdays, 9 A.M. till 2 P.M., except during the months of June, July, August and September, when the office will be closed on Saturdays at 12 M.; Sundays, 10 A.M. till 12 M.; Holidays, from 10 A.M. till 12 M.; other days, from 9 A.M. till 5 P.M.

UNDERTAKER'S RETURN.—~~Boston.~~

Date of death, June 11' 1898. Name, Claudon F. Brown.

Maiden name,* ..... Sex, M.

~~Married~~, single, or ~~widow of~~ ..... ~~wife of~~ .....

Color, W. Age, — years, 4 mos., 15 days. Residence, Winthrop

Place of death (street and number), 90 Pleasant St. ward .....

Place of birth, Winthrop (Occupation, Father) Janitor

Name of father, Frederick A. Maiden name of mother, Catharine A. Whittington

Birthplace of father, E. Boston Birthplace of mother, Yarmouth N. S.

Place of interment,† E. Boston Cemt.

*If a married woman or a widow. †Give the name of the burial ground.

E. G. Brown, Undertaker.

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	June 11 " 1895
2. Name, ...	Millicent L. Anderson
(Maiden Name).* .	
(Name of Husband),*	
3. Sex, and whether single, Married, or Widowed,	F
4. Color,†	W. E.
5. Age, ...	11 Years, 3 Months, 18 Days.
(Disease or Cause of Death, (Primary and Secondary),‡	
6. Duration of Sickness, .	
(By whom certified, .	
7. Residence, ...	Hastings, Mass.
8. Occupation, ...	
9. Place of Death, . . .	116, Boardman [illegible]
10. Place of Birth, . . .	[illegible]
11. Name of Father, . .	John F. Anderson
12. Name of Mother, . . (Maiden Name),	Lennie G. Brown
13. Birthplace of Father, .	[illegible]
14. Birthplace of Mother. .	Brunswick, Me.
15. Place of Interment, .	Winthrop Cemetery
Signature of Undertaker ~~or other person~~ making the Return, ...	Alonzo Floyd

DATED at Winthrop, on June 11 18 95

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

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PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Millicent Louise Anderson Age, 11 yrs 3 Mos 18

Date and Place of Death,† - died at Winthrop (Winthrop St) June 11 1898,

Disease or Cause of Death, - of Shock, from fracture of pelvis
(Primary and Secondary.)‡

Duration of Sickness, - - and internal injuries. (Accident)

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, F. E. Johnson. M.D.

Date of Certificate, June 12 1898.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December. 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	June 25 1898
2. Name, ...	Mamie F. Bebe
(Maiden Name),* .	
(Name of Husband),*	Albert A. Bebe
3. Sex, and whether single,	Female
Married, or Widowed,	Married
4. Color,†	White
5. Age, ...	30 Years, 5 Months, 13 Days.
(Disease or Cause of Death, (Primary and Secondary),‡	
6. Duration of Sickness, .	
(By whom certified, .	
7. Residence, ...	
8. Occupation, ...	
9. Place of Death, . . .	
10. Place of Birth, . . .	
11. Name of Father, . .	
12. Name of Mother, . . (Maiden Name),	
13. Birthplace of Father, .	
14. Birthplace of Mother, .	
15. Place of Interment, .	
Signature of Undertaker ~~or other person~~ making the Return, . . .	

DATED at Smithy, on June 25 1898

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Mamie Florence Wyman *Age,* 30-5-17

Date and Place of Death,† - *died at* Winthrop (Shirley Street) June 25" *1898,*

Disease or Cause of Death, - *of* Tuberculosis.
(Primary and Secondary.)‡

Duration of Sickness, - - 10 months

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, W. R. Lefebvre M.D. Winthrop.

Date of Certificate, June 26" *1898.*

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE OF THE CAUSE OF DEATH.

Boston, June 30 1898

Name and age of deceased: Catherine Touchie Age 37 yrs. mos. dys.

Date and place of death: June 29 1898 #315 Berman St Winthrop

Disease or cause of death: Phthisis Pulmonalis

*Duration of disease:** 6 months

I certify that the above is true, to the best of my knowledge and belief.

Name and residence of physician. Henry L Shannon M. D.
228 Saratoga St

*It is very desirable to be informed of the duration of the disease.

The office of the Board of Health will be open for the granting of permits for burial, as follows: — Saturdays, 9 A.M. till 2 P.M., except during the months of June, July, August and September, when the office will be closed on Saturdays at 12 M.; Sundays, 10 A.M. till 12 M.; Holidays, from 10 A.M. till 12 M.; other days, from 9 A.M. till 5 P.M.

UNDERTAKER'S RETURN. ~~Boston.~~

Date of death, June 29 189.. Name, Catherine Toucher.

Maiden name,* Katherine O'Neil Sex, Female

Married, single, or widow of —— wife of John Toucher

Color, W Age, 37 years, — mos., — days. Residence, 31½ Hermon St. Winthrop

Place of death (street and number), Residence ward

Place of birth, St Johns N.F. Occupation, Housewife

Name of father, James O'Neil Maiden name of mother, Catherine Collins.

Birthplace of father, St Johns N.F. Birthplace of mother, Ireland

Place of interment,† Holy Cross Cemetery Malden.

*If a married woman or a widow. †Give the name of the burial ground.

Jerome F. Morrid Undertaker.

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . . July 9th 1898
2. Name, ... Nancy Ethridge
   (Maiden Name),* . . Bell
   (Name of Husband),* . Martin N.
3. Sex, and whether single, Female
   Married, or Widowed, Widow
4. Color,† . . . . . White
5. Age, ... 69 Years, 6 Months, 10 Days.
6. Disease or Cause of Death, (Primary and Secondary),‡
   Duration of Sickness, .
   By whom certified, .
7. Residence, ... Milton Mass
8. Occupation, . . . 31 State Street
9. Place of Death, . . .
10. Place of Birth, . . .
11. Name of Father, . . Stephen Bell
12. Name of Mother, . . Elizabeth Chadsey
    (Maiden Name),
13. Birthplace of Father, .
14. Birthplace of Mother, .
15. Place of Interment, . Hospital Cem.

Signature of Undertaker ~~or other person~~ *making the Return* . . . Sumner Ford

DATED at Milton, on July 9th 1898

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Mrs Nancy Etherington Age, 69-6-10

Date and Place of Death,† - died at 31 Atlantic Street, Winthrop July 9th 1898.

Disease or Cause of Death, - of Cancer of Duodenum
(*Primary and Secondary.*)‡

Duration of Sickness, - - Three months

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Stephen R. Pearce
37 Atlantic St. Lynn, Mass

Date of Certificate, July 9 1898.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December. 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

No. ....

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	13 July 1898
2. Name, ...	David Henry Clark
(Maiden Name),* .	—
(Name of Husband),*	—
3. Sex, and whether single,	Male
Married, or Widowed,	Married
4. Color,†	White
5. Age, ...	64 Years, 8 Months, 19 Days.
(Disease or Cause of Death, (Primary and Secondary),‡	Apoplexy
6. Duration of Sickness, .	
(By whom certified, .	
7. Residence, ...	14 Albion St., Roxbury, Mass.
8. Occupation, ...	Salesman
9. Place of Death, . . .	Winthrop
10. Place of Birth, . . .	Wilmot N. S.
11. Name of Father, . .	Uriah Johnson Clark
12. Name of Mother, . . (Maiden Name).	Julia Ann Bol[illegible]
13. Birthplace of Father, .	Wilmot, N. S.
14. Birthplace of Mother, .	Liverpool, Eng.
15. Place of Interment, .	Mt. Hope Cemetery
Signature of Undertaker ~~or other person~~ making the Return, ...	Sumner Floyd

DATED at Winthrop, on July 14th 1898

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

Be very particular to fill all Blanks.

Plate. Ed. Dec., 1896.—5,000

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** David Henry Clark *Age,* 65 yrs

Date and Place of Death,† - *died at* Winthrop July 13" 1898,

Disease or Cause of Death, - *of* Apoplexy
(Primary and Secondary.)‡

Duration of Sickness, - -

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, C. Johnson M.D.

Date of Certificate, July 1st 1898.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896. — 5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

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No.

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	July 18 18[illegible]
2. Name, ...	Eliza M Dunbar
(Maiden Name),* .	
(Name of Husband),*	
3. Sex, and whether single,	Female
Married, or Widowed,	
4. Color,†	White
5. Age, ...	11 Years, 2 Months, 5 Days.
(Disease or Cause of Death, (Primary and Secondary),‡	
6. Duration of Sickness, .	Diphtheria
By whom certified, .	
7. Residence, ...	[illegible]
8. Occupation, ...	
9. Place of Death, . .	136 Lucas Ave
10. Place of Birth, . . .	East Boston
11. Name of Father, . .	Charles M Dunbar
12. Name of Mother, . . (Maiden Name).	Mary E. Ingram
13. Birthplace of Father, .	Yarmouth N.S.
14. Birthplace of Mother, .	Dublin Ireland
15. Place of Interment, .	[illegible] Cem.
Signature of Undertaker ~~or other person~~ making the Return, ...	Simmons Hyde

DATED at Boston, on Dec 15 18[illegible].

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

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PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Stella M Dunham Age, 11 yrs – 2 Mos

Date and Place of Death,† - *died at* Winthrop July 18th 1898 189 ,

Disease or Cause of Death, - *of* Pulmonary Tuberculosis
(Primary and Secondary.)‡

Duration of Sickness, - - about 7 months.

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, J H Quigg . M.D. Peabody mass.

Date of Certificate, July 18 189 8.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896. — 5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

No.

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	July 19 1898
2. Name, ...	Edward E Sims
(Maiden Name).* .	
(Name of Husband).*	
3. Sex, and whether single, Married, or Widowed,	Male
4. Color,†	Black
5. Age, ...	16 Years, 4 Months, 6 Days.
(Disease or Cause of Death, (Primary and Secondary),‡ 6. Duration of Sickness, .	
(By whom certified, .	
7. Residence, ...	Winthrop Mass
8. Occupation, ...	Student
9. Place of Death, . . .	Winthrop
10. Place of Birth, . . .	[illegible]
11. Name of Father, . .	[illegible]
12. Name of Mother. . . (Maiden Name),	[illegible]
13. Birthplace of Father, .	[illegible]
14. Birthplace of Mother. .	[illegible]
15. Place of Interment, .	Winthrop Cemetery
Signature of Undertaker ~~or other person~~ making the Return, . . .	[illegible]

DATED at Winthrop, on July 20 18 .

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896. — 5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent, or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

...nd Age of Deceased,* Edward L. Edwards Age, 16-4-6

...d Place of Death,† - died at Beech Road Winthrop Mass 19 1898,

... or Cause of Death, - of Phthisis
...mary and Secondary.)‡

...n of Sickness, - - Six months

I certify that the above is true, to the best of my knowledge and belief.

...Residence of Certifying Physician, Ben Hicks Metcalf

Date of Certificate, July 19 1898.

† If child died immediately after birth so state.

‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

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No. .....

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	Louise R. Cutler
2. Name, ...	/
(Maiden Name),* .	Rockwood
(Name of Husband),*	Cutler
3. Sex, and whether single,	Female
Married, or Widowed,	Widowed
4. Color,†	White
5. Age, ...	82 Years, 1 Months, 12 Days.
(Disease or Cause of Death, (Primary and Secondary),‡	Dr. [illegible]
6. Duration of Sickness, .	[illegible]
(By whom certified, .	[illegible]
7. Residence, ...	Winthrop
8. Occupation, ...	[illegible]
9. Place of Death, . . .	[illegible]
10. Place of Birth, . . .	[illegible]
11. Name of Father, . .	[illegible]
12. Name of Mother, . . (Maiden Name),	[illegible]
13. Birthplace of Father, .	[illegible]
14. Birthplace of Mother, .	[illegible]
15. Place of Interment, .	[illegible]
Signature of Undertaker ~~or other~~ person making the Return, ...	[illegible]

Dated at [illegible], on [illegible] 18 .

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

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SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Caroline R. Crocker Age, 82. 1. 12 (yr. m. d)

Date and Place of Death,† - *died at* Whitinsville July 21 1898,

Disease or Cause of Death, - *of* Paralysis
(*Primary and Secondary.*)‡

Duration of Sickness, - -

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Edward L. Goyt

Date of Certificate, July 22 1898.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

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PHYSICIAN'S CERTIFICATE OF THE CAUSE OF DEATH.

Boston, July 30 189 8

Name and age of deceased: Margaret Hennessy Age 5 yrs. 5 mos. 7 dys.

Date and place of death: July 29 1898 Municipal

Disease or cause of death: Meningitis

*Duration of disease:** 6 days

I certify that the above is true, to the best of my knowledge and belief.

Name and residence of physician. W. H. Grain Jr. 406 Massachusetts Ave M. D.

*It is very desirable to be informed of the duration of the disease.

The office of the Board of Health will be open for the granting of permits for burial, as follows:—Saturdays, 9 A.M. till 2 P.M., except during the months of June, July, August and September, when the office will be closed on Saturdays at 12 M.; Sundays, 10 A.M. till 12 M.; Holidays, from 10 A.M. till 12 M.; other days, from 9 A.M. till 5 P.M.

UNDERTAKER'S RETURN.—Boston.

Date of death, July 29 1898 Name, Margaret Heckington

Maiden name,* — Sex, F

Married, single, or widow of — wife of —

Color, W. Age, — years, 5 mos., 7 days. Residence, 26 Beal St Winthrop

Place of death (street and number), 26 Beal St. ward

Place of birth, 166 Paris st E. Boston Occupation,

Name of father, Wm F. Heckington Maiden name of mother, Julia Crowley

Birthplace of father, East Boston Birthplace of mother, East Boston

Place of interment,† Holy Cross Malden

*If a married woman or a widow. †Give the name of the burial ground.

Thos. J. Lane Undertaker.

No.

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death,	July 30" 1898.
2. Name,	(Betsey G.) Atwood
(Maiden Name),*	Rich
(Name of Husband),*	Allen Atwood
3. Sex, and whether single,	Female
Married, or Widowed,	Married
4. Color,†	White
5. Age,	62 Years, (Months, (Days
(Disease or Cause of Death, (Primary and Secondary),‡	
6. Duration of Sickness,	Dr Johnson
(By whom certified,	
7. Residence,	Winthrop Mass
8. Occupation,	
9. Place of Death,	222, Pleasant Street
10. Place of Birth,	Truro Mass
11. Name of Father,	
12. Name of Mother, (Maiden Name).	Lombard)
13. Birthplace of Father,	Truro Mass
14. Birthplace of Mother,	Truro Mass
15. Place of Interment,	Winthrop Cemetery
Signature of Undertaker ~~or other person~~ making the Return,	Sumner Floyd

DATED at Winthrop, on August 1" 1898

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

Be very particular to fill all Blanks.

Plate. Ed. Dec., 1896.—5,000

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Betsy L. Atwood *Age,* 62 yrs

Date and Place of Death,† - *died at* Winthrop Mass July 30 *189*8.

Disease or Cause of Death, - *of* Ovarian Cyst with Cancerous Degenerate
(Primary and Secondary.)‡

Duration of Sickness, - -

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, F. Johnson, M.D.

Date of Certificate, ~~Jan~~ Aug 1 *189*8.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896. — 5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

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No. ...

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	Aug 10th 1896 - 1130 pm
2. Name, ...	Beatrice Burke
(Maiden Name),* .	
(Name of Husband),*	
3. Sex, and whether single,	Female
Married, or Widowed,	
4. Color,†	White
5. Age, ...	Years, 5 Months, 5 Days.
(Disease or Cause of Death, (Primary and Secondary),‡	
6. Duration of Sickness, .	Five days
(By whom certified, .	Dr Johnson
	31 Temple ave
7. Residence, ...	
8. Occupation, ...	
9. Place of Death, . . .	Quincy Ave N. Highland
10. Place of Birth, . . .	Winthrop. Mass
11. Name of Father, . .	Chas E. Burke
12. Name of Mother, . . (Maiden Name),	Josephine K Burke
13. Birthplace of Father, .	Salem Me
14. Birthplace of Mother, .	Providence R I
15. Place of Interment, .	Grafton Mass
Signature of Undertaker ~~or other person~~ making the Return, ...	Sumner Floyd

Dated at Winthrop, on August 11 '98

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

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PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Beatrice Burke *Age,* 5 Mo - 5 ds

Date and Place of Death,† - *died at* Winthrop (Quincy Ave) Aug 11 1898,

Disease or Cause of Death, - *of* Cholera infantum
(*Primary and Secondary.*)‡

Duration of Sickness, - - 5 days

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, T. E. Pigott, M.D. Winthrop Highlands, Mass.

Date of Certificate, Aug. 11, 1898.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896. — 5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

No.

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death,	August 11 98
2. Name,	~~Bridget~~ Bridget E. Dolan
(Maiden Name).*	Bridgett E Rankin
(Name of Husband).*	James J Dolan
3. Sex, and whether single, Married, or Widowed,	Female Married
4. Color,†	White
5. Age,	38 Years, 10 Months, 4 Days.
6. Disease or Cause of Death, (Primary and Secondary),‡ Duration of Sickness, By whom certified,	Dr Pigott
7. Residence,	182 Chestnut St Lowell Mass
8. Occupation,	
9. Place of Death,	Cliff Ave W. Highland
10. Place of Birth,	East Cambridge Mass
11. Name of Father,	Edward Rankin
12. Name of Mother. (Maiden Name),	Elizabeth Rankin
13. Birthplace of Father,	Ireland
14. Birthplace of Mother.	" "
15. Place of Interment,	Lowell Mass
Signature of Undertaker ~~or other person~~ making the Return,	Summer Floyd

DATED at Winthrop, on August 11" 1898

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896. — 5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Bridget E. Dolan Age, 35 yrs 10 mo 4 ds

Date and Place of Death,† - died at Winthrop (Cliff Ave) Aug 11 " 1898,

Disease or Cause of Death, - of Peritonitis ( )
(*Primary and Secondary.*)‡

Duration of Sickness, - - one year

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, F. E. Scott, M.D. Winthrop Highlands, Mass.

Date of Certificate, Aug. 11, 1898.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896. — 5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

Commonwealth of Massachusetts.

No.

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	August 16" 1898
2. Name, ...	Ankel E. Snodgrass
(Maiden Name),* .	
(Name of Husband),*	
3. Sex, and whether single,	Male
Married, or Widowed,	
4. Color,†	
5. Age, ...	52 Years, 10 Months, 19 Days.
(Disease or Cause of Death, (Primary and Secondary),‡	
6. Duration of Sickness, .	
(By whom certified, .	
7. Residence, ...	Argyle St
8. Occupation, ...	Policeman
9. Place of Death, . . .	Argyle St
10. Place of Birth, . . .	Indiana (illegible - 1896)
11. Name of Father, . .	Hugh
12. Name of Mother, . . (Maiden Name),	Ann
13. Birthplace of Father, .	Indiana
14. Birthplace of Mother, .	Indiana
15. Place of Interment, .	Stillwood Bentley
Signature of Undertaker ~~or other person~~ making the Return, ...	Summer Flyd

DATED at Millbury, on Aug 17, 1898

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

Name and Age of Deceased,* Ord. Ordnance Sergt. U.S. Army in Civil War. 2 mo d
Annie E. Snodgrass Age, 52-10-19

Date and Place of Death,† - died at Winthrop August 16" 1898,

Disease or Cause of Death, - (Primary and Secondary.)‡ Primary Acute Articular Rheumatism, of and Chron. Manifestis Suppurative Arthritis
Secondary Acute Pulmonary Tuberculosis.

Duration of Sickness, - - Unknown To me, but many months.

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Frank A. Gillan
15 Princeton St.
East Boston Mass.

Date of Certificate, Aug 17, 1898.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ A soldier — who served in the War of the Rebellion.

Plate. Ed. October, 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE OF THE CAUSE OF DEATH.

Boston, Aug 17th 1898.

Name and age of deceased: Cyrus Hicks Age yrs. mos. dys.

Date and place of death: Aug. 17th Winthrop (Crest)

Disease or cause of death: Accidental drowning

*Duration of disease:** .

I certify that the above is true, to the best of my knowledge and belief.

Name and residence of physician. Francis A Harris M. D.
Head-Francis

*It is very desirable to be informed of the duration of the disease.

The office of the Board of Health will be open for the granting of permits for burial, as follows:—Saturdays, 9 A. M. till 2 P. M.; Sundays, 10 A. M. till 12 M.; Holidays, from 10 A. M. till 12 M.; other days, from 9 A. M. till 5 P. M.

UNDERTAKER'S RETURN.—Boston.

Date of death, Aug 17th 189? Name, Agnes Nichols

Maiden name.* — Sex,

Married, single, or widow of Single wife of —

Color, W Age, 24 years, — mos., — days. Residence,

Place of death (street and number), Winthrop Mass, 1 mile ward —

Place of birth, New Brunswick Occupation, Operative

Name of father, Charles L. Maiden name of mother, Mahetal Humphrey

Birthplace of father, New Brunswick Birthplace of mother, New Brunswick

Place of interment,† Hardwick Corner

* If a married woman or a widow. † Give the name of the burial ground.

Signature of Undertaker: Summer Floyd

Thirty.

Offii —

Boy —

Embalm —

Lun, Lunc

Remual —

No.

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	August 22 1895
2. Name, ...	James P. Johnstone
(Maiden Name),* .	
(Name of Husband),*	
3. Sex, and whether single,	Male
Married, or Widowed,	Married
4. Color,†	White April 10/78
5. Age, ...	78 Years, Months, Days.
(Disease or Cause of Death, (Primary and Secondary),‡	
6. Duration of Sickness, .	
(By whom certified, .	
7. Residence, ...	Whitinsville Mass
8. Occupation, ...	Tailor
9. Place of Death, . . .	Uxbridge Mass
10. Place of Birth, . . .	Scotland
11. Name of Father, . .	
12. Name of Mother, . . (Maiden Name).	Catherine Baxter
13. Birthplace of Father, .	Scotland
14. Birthplace of Mother, .	Ireland
15. Place of Interment, .	Whitinsville Cemetery
Signature of Undertaker ~~or other person~~ making the Return, ...	Undertaker

DATED at Whitinsville, on August 22, 1895.

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

Be very particular to fill all Blanks.

Plate. Ed. Dec., 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** James P. Johnelore Age, 78 years

Date and Place of Death,† - died at Winthrop (Somerset Ave) Aug 22 1898,

Disease or Cause of Death, - of Old age
(Primary and Secondary.)‡

Duration of Sickness, - -

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Horace L Soule Winthrop Mass

Date of Certificate, Aug 25th 1898.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896. — 5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

No. .....

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	September 4th 1898.
2. Name, ...	William Nichols
(Maiden Name),* .	
(Name of Husband),*	
3. Sex, and whether single, Married, or Widowed,	Male Married
4. Color,†	White
5. Age, ...	69 Years, — Months, — Days.
6. Disease or Cause of Death, (Primary and Secondary),‡ Duration of Sickness, . By whom certified, .	
7. Residence, ...	Hinthrop Mass
8. Occupation, ...	Merchant
9. Place of Death, . . .	Johnson Avenue
10. Place of Birth, . . .	Birmingham Eng
11. Name of Father, . .	John
12. Name of Mother, . . (Maiden Name),	Sarah Rex
13. Birthplace of Father, .	England
14. Birthplace of Mother, .	England
15. Place of Interment, .	Woodlawn Cemetery
Signature of Undertaker ~~or other person~~ making the Return, ...	Sumner Floyd

DATED at Winthrop, on Sept 5th 1898

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000.

Forms

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** William Nichols Age, 69 yrs

Date and Place of Death,† - *died at* Winthrop Sept 5 189 8,

Disease or Cause of Death, - *of* Bright's disease (Interstitial Nephritis)
(Primary and Secondary.)‡ (Uraemic Convulsions)

Duration of Sickness, - - Four or five years. Final Sickness one week.

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Albert B. Dorman, M.D.

Date of Certificate, Sept. 5th, 1898.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed December, 1896.—5,000

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

No.

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death,	September 5th 1898
2. Name,	James A. Brown
(Maiden Name),*	
(Name of Husband),*	
3. Sex, and whether single,	Male
Married, or ~~Widowed~~,	
4. Color,†	White
5. Age,	50 Years, Months, Days.
(Disease or Cause of Death, (Primary and Secondary),‡	
6. Duration of Sickness,	
By whom certified,	D. F. A. Harris "Med Exam"
7. Residence,	230 Bine St Everett
8. Occupation,	Tailor
9. Place of Death,	Ocean Spray Winthrop
10. Place of Birth,	Ireland
11. Name of Father,	Michael
12. Name of Mother, (Maiden Name).	Unknown
13. Birthplace of Father,	Ireland
14. Birthplace of Mother,	Ireland
15. Place of Interment,	Holy Cross Malden
Signature of Undertaker ~~other person~~ making the Return,	~~F. H. Carter~~ Sumner Floyd

DATED at Winthrop, on 6th of Sept 1898

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

Be very particular to fill all Blanks.

Plate. Ed. Dec., 1896.—5,000

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until it has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE OF THE CAUSE OF DEATH.

Boston, Winthrop Sept. 6th 1898

Name and age of deceased: James A. Brown *Age* 50 *yrs.* *mos.* *dys.*

Date and place of death: Sept. 5th Ocean Spray Winthrop

Disease or cause of death: Fract. of Skull &c R. R. Accident.

*Duration of disease:**

I certify that the above is true, to the best of my knowledge and belief.

Name and residence of physician. Francis A. Harris M. D.
Med. Examr.

*It is very desirable to be informed of the duration of the disease.

The office of the Board of Health will be open for the granting of permits for burial, as follows:—Saturdays, 9 A.M. till 2 P.M.; Sundays, 10 A.M. till 12 M. Holidays, from 10 A.M. till 12 M.; other days, from 9 A.M. till 5 P.M.

PHYSICIAN'S CERTIFICATE OF THE CAUSE OF DEATH.

Boston, Sept 6 1898

Name and age of deceased: Loretta E Kelly *Age* — yrs. 7 mos. — dys.

Date and place of death: Sept 6 1898 58 Lucerne Dorchester

Disease or cause of death: Infantile Atrophy

*Duration of disease:** one (3) weeks

I certify that the above is true, to the best of my knowledge and belief.

Name and residence of physician. Hetau J McGlue M. D.
58 Lucerne Dor

*It is very desirable to be informed of the duration of the disease.

The office of the Board of Health will be open for the granting of permits for burial, as follows: — Saturdays, 9 A.M. till 2 P.M., except during the months of June, July, August and September, when the office will be closed on Saturdays at 12 M.; Sundays, 10 A.M. till 12 M.; Holidays, from 10 A.M. till 12 M.; other days, from 9 A.M. till 5 P.M.

UNDERTAKER'S RETURN.—Boston.

Date of death, Sept 6 1898. Name, Loretta A Kelley

Maiden name,* — Sex, F

Married, single, or widow of — wife of —

Color, W. Age, — years, 2 mos., — days. Residence, 58 Lincoln St

Place of death (street and number), 58 Lincoln St. ward Winthrop

Place of birth, Boston Occupation, Milk Business

Name of father, John Maiden name of mother, Sadie Tovey

Birthplace of father, Kellsky Birthplace of mother, Boston

Place of interment,† Holy Cross Malden

*If a married woman or a widow. †Give the name of the burial ground.

Thos. J. Lane, Undertaker.

No. ——

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	September 17th 1898
2. Name, ...	Mary S. Pearson.
(Maiden Name),* .	
(Name of Husband),*	
3. Sex, and whether single,	Single
Married, or Widowed,	
4. Color,†	White
5. Age, ...	39 Years, 2 Months, 29 Days.
(Disease or Cause of Death, (Primary and Secondary),‡	
6. Duration of Sickness, .	Dr O E Johnson
(By whom certified, .	
7. Residence, ...	Hotel Touraine Boston Mass
8. Occupation, ...	Cashier
9. Place of Death, . . .	Winthrop Highlands Mass
10. Place of Birth, . . .	Charlestown Mass
11. Name of Father, . .	Francis H. Pearson
12. Name of Mother, . . (Maiden Name),	Martha P. (Stetson)
13. Birthplace of Father, .	Charlestown Mass
14. Birthplace of Mother, .	Hampton N H
15. Place of Interment, .	Mt Auburn
Signature of Undertaker ~~or other person~~ making the Return, ...	Sumner Floyd

DATED at Winthrop, on Sept 19th 1898

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000.

M. L. Parsons

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

Name and Age of Deceased,* Mary S. Pearson Age,

Date and Place of Death,† - died at 7 Winthrop (Cliff Ave) Sept 17" 1898,

Disease or Cause of Death, - of Pernicious Anaemia with
(Primary and Secondary.)‡

Duration of Sickness, - - Valvular Heart Disease. (Permit)

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, C. E. Johnson. MD

Date of Certificate, Sept 19 1898.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

No.

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death. . . .	September 18 1898
2. Name, ...	Harold Ignatius Kennedy
(Maiden Name),* .	
(Name of Husband),*	
3. Sex, and whether single, Married, or Widowed,	Male
4. Color,†	White
5. Age, ...	Years, 10 Months, 23 Days.
(Disease or Cause of Death, (Primary and Secondary),‡	
6. Duration of Sickness, .	
(By whom certified, .	
7. Residence, ...	Winthrop Mass
8. Occupation, ...	
9. Place of Death, . . .	Cora Street
10. Place of Birth, . . .	Winthrop Mass
11. Name of Father, . .	John J. Kennedy
12. Name of Mother, . . (Maiden Name),	Ellen Boyle
13. Birthplace of Father, .	Boston
14. Birthplace of Mother, .	Ireland
15. Place of Interment. .	Mount Benedict Cemetery
Signature of Undertaker ~~or other person~~ making the Return, ...	Sumner Floyd

DATED at Winthrop, on Sept 19 1898

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

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SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Harold L. Kennedy Age, 10 mos -23 ds

Date and Place of Death,† - died at Winthrop - Cora Street - Sept 18th 1898.

Disease or Cause of Death, - of Cholera Infantum -
(Primary and Secondary.)‡

Duration of Sickness, - -

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, F. E. Johnson M.D.

Date of Certificate, Sept 19 1898.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

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No.

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	September 19th 1898
2. Name, ...	Franklin W. Barrett
(Maiden Name),* .	
(Name of Husband),*	
3. Sex, and whether single,	Male
Married, or Widowed,	Married
4. Color,†	White
5. Age, ...	69 Years, 9 Months, 21 Days.
(Disease or Cause of Death, (Primary and Secondary),‡	Ca Carcinoma
6. Duration of Sickness, .	
(By whom certified, .	
7. Residence, ...	Winthrop Mass
8. Occupation, ...	None
9. Place of Death, . . .	Atlantic Street
10. Place of Birth, . . .	Wardsham Vt
11. Name of Father, . .	Hubbard Barrett
12. Name of Mother, . . (Maiden Name),	Mary Flower
13. Birthplace of Father, .	Wardsham Vt
14. Birthplace of Mother, .	Wardsham Vt
15. Place of Interment, .	Woodlawn Cemetery
Signature of Undertaker ~~or other person~~ making the Return, . . .	Sumner Floyd

DATED at Winthrop, on Sept 20th 1898

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

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SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Franklin W. Barrett Age, 69-9-21

Date and Place of Death,† - *died at* Winthrop (6 Atlantic St) Sept 19th 1898,

Disease or Cause of Death, - *of* Cholera Morbus with paralysis of the heart
(Primary and Secondary.)‡

Duration of Sickness, - - Unknown

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Dr H Campbell C. Boston

Date of Certificate, ... 189 .

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1898. — 5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

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(Burial Permit.) No.

Return of Death to the City Clerk.

~~CITY OF SALEM, MASS.~~

Date of Death, Sept. 20 1898

Name, Male child of Joichain Blaquière

Maiden Name,[1]

Sex, *male; Single, Married, Widow* . Color[2] (*if other than white*)

Aged years, months, ½ days

Cause of death, Premature Birth

Residence,[3]—*No.* Cingle 31 Read ~~Road~~ *Street.*

Place of death,—*No.* " " *Street.*

Occupation,

Birthplace, Montreal Canada

Name of Father, Joichain Blaquière

Maiden Name of Mother, Celard Déchaine

Birthplace of Father, Canada

Birthplace of Mother, "

To whom Married,

Attending Physician,

Date of Interment or Removal, to Salem for Burial. Sept. 21 1898

Place of Interment { Ground, St. Mary. Lot

Section, 3 Range, 9 Grave, 94

Undertaker (signature), D. Bernier.

16 Harbor St. Salem Mass.

☞ The foregoing must be filled out and signed by the undertaker and returned to the city clerk, together with the physician's certificate of the cause of death duly approved by the board of health, before a burial permit can be issued.

No. .....

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	September 26" 1898
2. Name, ...	Lydia A. Le Vangie
(Maiden Name).* .	
(Name of Husband).*	
3. Sex, and whether single, Married, or Widowed.	Female
4. Color,†	White
5. Age, ...	Years, 4 Months, 25 Days.
(Disease or Cause of Death, (Primary and Secondary),‡ 6. Duration of Sickness. .	Dr O E Johnson
(By whom certified. .	
7. Residence, ...	Manthrop Mass
8. Occupation.	
9. Place of Death. . .	Madison Ave Winthrop Mass
10. Place of Birth, . . .	Winthrop Mass
11. Name of Father, . .	Arthur Le Vangie
12. Name of Mother, . . (Maiden Name),	Ellen Delorey
13. Birthplace of Father. .	Nova Scotia
14. Birthplace of Mother, .	Nova Scotia
15. Place of Interment, .	Lynn Mass (Maddie)
Signature of Undertaker ~~or other person~~ making the Return, ...	Sumner Floyd

DATED at Winthrop, . ON Sept 26" 18 98.

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896. — 5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Lucille Ann LeVangie. Age, 4 mos 25 days

Date and Place of Death,† died at Winthrop, Mass. Sept 26 1898.

Disease or Cause of Death, (*Primary and Secondary.*)‡ of Cholera Infantum.

Duration of Sickness, 7 days.

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, O. E. Johnson MD.

Date of Certificate, Sept 26 1898.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. May, 1893. — 5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	Oct 5th 1898
2. Name, ...	Martha A. Hamilton
(Maiden Name),* .	Polyson
(Name of Husband),*	[illegible]
3. Sex, and whether single,	[illegible]
Married, or Widowed,	[illegible]
4. Color,†	White
5. Age, ...	35 Years, 7 Months, 5 Days.
(Disease or Cause of Death, (Primary and Secondary),‡	
6. Duration of Sickness, .	Dr Hy Perce
(By whom certified, .	Dr Hy Perce
7. Residence, ...	Smithfield Va
8. Occupation, ...	
9. Place of Death, . . .	Oct 5th 98 Big Cove Isle of Wight Co
10. Place of Birth, . . .	New Branch Va
11. Name of Father, . .	Moses Polyson
12. Name of Mother, . . (Maiden Name),	Rachael Case
13. Birthplace of Father, .	New Branch Va
14. Birthplace of Mother, .	New Branch Va
15. Place of Interment, .	Smithfield Va
Signature of Undertaker ~~or other person~~ making the Return, ...	[illegible]

DATED at Smithfield, on Oct 6 1898

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

{Be very particular to fill all Blanks.}

Plate. Ed. Dec., 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Martha Ann Hamilton Age, 35-7-5

Date and Place of Death,† - died at Winthrop (Beach Road) Oct 5 1898,

Disease or Cause of Death, - of Puerperal fever

(Primary and Secondary.)‡‡

Duration of Sickness, - - Seven days

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Horace Soule M.D. Winthrop Mass

Date of Certificate, Oct 7th 189 .

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

No.

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	October 6th 1895
2. Name, ...	Susan A. Dillon
(Maiden Name),* .	Teele
(Name of Husband),*	[illegible]
3. Sex, and whether single,	Female
Married, or Widowed,	Widow
4. Color,†	White
5. Age, ...	86 Years, 4 Months, [illegible] Days.
(Disease or Cause of Death, (Primary and Secondary),‡	
6. Duration of Sickness, .	Old Age
(By whom certified, .	[illegible]
7. Residence, ...	91 [illegible]
8. Occupation, ...	5[illegible] [illegible]
9. Place of Death, . . .	[illegible]
10. Place of Birth, . . .	[illegible]
11. Name of Father, . .	[illegible]
12. Name of Mother, . . (Maiden Name),	
13. Birthplace of Father, .	
14. Birthplace of Mother, .	
15. Place of Interment, .	[illegible]
Signature of Undertaker ~~or other person~~ making the Return, ...	[illegible]

DATED at , on 18 .

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 26.*

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

Name and Age of Deceased,* Susan Adams Allen Age, 86-4

Date and Place of Death,† - died at Winthrop (Winthrop St) Oct 6th 1898,

Disease or Cause of Death, - of Cystitis Carcinoma abdominalis, old age.
(Primary and Secondary.)‡

Duration of Sickness, - - 6 yrs

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, B. H. Metcalf M.D. Winthrop St

Date of Certificate, Oct 7th 1898.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December. 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE OF THE CAUSE OF DEATH.

Boston, Oct. 8th 189 8

Name and age of deceased: Victor Malesski *Age* 26 *yrs.* 7 *mos.* *dys.*

Date and place of death: Oct. 8th " Winthrop U.S. Hospital

Disease or cause of death: Dysentery — Pneumonia.

*Duration of disease:**

I certify that the above is true, to the best of my knowledge and belief.

Name and residence of physician. Francis A Harris M. D
Acty Asst Surgeon U.S.A.

* It is very desirable to be informed of the duration of the disease.

The office of the Board of Health will be open for the granting of permits for burial, as follows: — Saturdays, 9 A.M. till 2 P.M.; Sundays, 10 A.M. till 12 M. Holidays, from 10 A.M. till 12 M.; other days, from 9 A.M. till 5 P.M.

UNDERTAKER'S RETURN.—Boston.

Date of death, Oct 8" 1898 Name, Victor Maleski

Maiden name,* ~~~ Sex, Male

Married, ~~or~~ single, ~~or widow of~~ Unknown wife of ~~~

Color, W Age, 26 years, 6 mos., ~ days. Residence, W. 7th & Edwards

Place of death (street and number) 23 Pleasant Avenue ~~ward~~

Place of birth, Russia Poland Occupation, Barber

Name of father, ~~Unknown~~ Maiden name of mother, Unknown

Birthplace of father, ~~Unknown~~ Birthplace of mother, ~~Unknown~~

Place of interment,† Holy Cross Cemetery (Malden)

*If a married woman or a widow. †Give the name of the burial ground.

Signature of Undertaker: Sumner Floyd

Oct 8/191

PHYSICIAN'S CERTIFICATE OF THE CAUSE OF DEATH

Winthrop Oct-15 1898

~~Cambridge~~,

Name of Deceased* Augustus Trivoli Age 72 Years 6 Months — Days.

Place and Date of Death; Died at Terrace Av Street Oct-15 1898

Disease, or Cause of Death Bright's Disease complicated with Disease of Heart.

Duration of Disease Six months probably longer

I certify that the above is true to the best of my knowledge and belief.

Signature of Physician Edward F. Gaye M. D.

Residence 131 Crest Ave Winthrop

*Or Sex of Infant (not named).

The office of Board of Health will be open for the granting of permits for burial as follows: Saturdays, 8 A. M. till 2 P. M.; Sundays and Holidays, 12 M. till 1 P. M.; Other Days, from 8 A. M. till 4 P. M.

BE VERY CAREFUL TO FILL ALL BLANKS IN INK

(OVER)

Section 5. Any person violating the provisions of either of the four preceding sections shall forfeit not exceeding fifty dollars.

Section 6. No railroad corporation or other common carrier or person shall convey or cause to be conveyed, through or from any city or town in this Commonwealth, the remains of any person who has died of small-pox, scarlet fever, diphtheria or typhus fever, until such body has been so encased and prepared as to preclude any danger of communicating the disease to others by its transportation; and no city or town clerk, or clerk or agent of the board of health, shall give a permit for the removal of such body until he has received from the board of health of the city or from the selectmen of the town where the death occurred a certificate stating the cause of death, and that said body has been prepared in the manner set forth in this section, which certificate shall be delivered to the agent or person who receives the body. Any person violating the provisions of this section shall forfeit not exceeding twenty-five dollars.

Section 7. The boards of health of cities and towns shall, on or before the first day of May in each year, license a suitable number of undertakers who can read and write the English language, to take charge of the funeral rites preliminary to the interment, removal or cremation of a human body. Such licenses shall be issued under such terms and upon such conditions as the board of health may prescribe, and may be revoked at any time by the board when such terms or conditions or any requirements of law relative thereto have been violated by the undertaker: *provided*, *however*, that an undertaker so licensed shall have the right to act thereunder in any city or town in the Commonwealth.

Acts of 1897, Chap. 444, Sect. 10.

A physician who has attended a person during his last illness shall forthwith, after the death of said person, furnish for registration at the request of a duly licensed undertaker or other authorized person, or any member of the family of such deceased person, a certificate, stating to the best of his knowledge and belief the name of the deceased, his supposed age, the decease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at the birth of a child dying immediately thereafter, or a physician or midwife who has attended at the birth of a child born dead, shall forthwith furnish for registration a certificate stating that to the best of his or her knowledge and belief such child either died immediately after birth or was born dead.

A physician or midwife who neglects or refuses to make the certificate required by this section or who makes a false statement therein shall forfeit not exceeding fifty dollars.

UNDERTAKER'S RETURN OF A DEATH

Date of Death Oct-15-1898

Name of Deceased

Augustus Tribble

(Maiden Name)*

(Husband's Name)

Sex Male

Color† White

Condition, (~~Single~~, Married, ~~or Widowed~~)

Age, 72 Years, 6 Months, —— Days.

Occupation (if over 14 years old)

Book Keeper

Occupation (if under 1 year old) of Father

Residence Winthrop Mass

Place of Death Terrace Av. Winthrop

Place of Birth Plymouth Mass

Name of Father Isaac Tribble

Birthplace of Father Kingston Mass

MAIDEN Name of Mother Lois Hubbard

Birthplace of Mother Plymouth Mass

Place of Interment Arlington Mass

Signature of Undertaker, ~~or other person~~ making the Return.

Horace D. Litchfield
401 Mass Av.
Cambridge Post
Mass

Cambridge Oct 15 1898

* If a Married Woman or a Widow.

† (W) White; (B) Black; (M) Mulatto.

facts required by law to be returned and recorded, which statement in every case of an original interment shall be accompanied by a satisfactory certificate of the attending physician, if any, as required by law, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, or is insufficient, the chairman of the board of health, if a physician, or any physician employed by said board or by the selectmen for the purpose, shall upon application make such certificate as is required of the attending physician; and in case of death by violence the medical examiner only shall make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent the board or agent shall forthwith countersign and transmit the same to the clerk of the city or town for registration. The person to whom the permit is so given, and the physician who certifies to the cause of death, shall thereafter furnish for registration any other necessary information that can be obtained as to the deceased, or as to the manner or cause of the death, which the clerk or registrar may require.

SECTION 2. No undertaker or other person shall bury in a city or town a human body or the ashes thereof brought into this Commonwealth from without its limits until he shall have received a permit so to do from the board of health, other than the selectmen, or its agent duly appointed to issue such permits, or if there is no such board, from the clerk of the city or town in which the body is to be buried or the funeral rites are to be held: *provided*, *however*, that if there is a person duly appointed to have the care of the cemetery or burial ground in which the interment is made, and there is a record kept of the names of all persons buried therein, or if there is a duly appointed superintendent of burials in such city or town who keeps a record of interments, said permit may be issued by such person having such care or by said superintendent of burials. Said permit may be granted upon delivery to said board, agent, clerk, superintendent or person having such care, as the case may be, of a certificate giving the name of the deceased person, his age as nearly as can be ascertained, the cause of death, the name of the city or town where he last resided or from which the body was brought, or, if the death occurred at sea, the name of the vessel upon which it occurred, and any other facts required for record which could be obtained with reasonable exertion. When such certificate is delivered to the board of health, or to its agent, or to the superintendent or person having such care, the board, agent, superintendent or person having such care shall forthwith countersign and transmit the same to the clerk of the city or town; and if the deceased person was at the time of his decease a resident of said city or town the clerk shall record the same in the books kept for recording deaths; but if the deceased was at the time of his death a resident of any other city or town within this Commonwealth said clerk shall forthwith forward to the clerk of such other city or town a certified copy of the certificate mentioned in this section.

SECTION 3. No person having the care of a cemetery or burial ground shall permit a human body to be buried therein or removed therefrom, or permit the ashes of a human body to be removed therefrom, until there has been delivered to him the permit for the burial or removal of said body or ashes, nor permit the ashes of a human body to be buried therein until there has been delivered to him a certificate that the burial permit and the certificate of the medical examiner prerequisite to the cremating of said body have been duly presented.

SECTION 4. No undertaker shall bury the ashes of a human body which has been cremated until he has received from the person having the charge of the crematory a certificate that the burial permit and the certificate of the medical examiner prerequisite to the cremating of said body have been duly presented.

Commonwealth of Massachusetts.

No.

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	Oct 22 1896
2. Name, ...	Mark Jendrick
(Maiden Name),* .	
(Name of Husband),*	
3. Sex, and whether single, Married, or Widowed,	
4. Color,†	White
5. Age, ...	Years, 1 Months, 24 Days.
(Disease or Cause of Death, (Primary and Secondary),‡ 6. Duration of Sickness, .	
(By whom certified, .	
7. Residence, ...	[illegible]
8. Occupation, ...	[illegible]
9. Place of Death, . . .	[illegible] Park
10. Place of Birth, . . .	[illegible]
11. Name of Father, . .	Joseph Jendrick
12. Name of Mother, . . (Maiden Name),	Dethkie "
13. Birthplace of Father, .	Poland Russia
14. Birthplace of Mother, .	Poland Russia
15. Place of Interment, .	[illegible] Cemetery
Signature of Undertaker ~~or other person~~ making the Return, ...	[illegible] Fred

Dated at [illegible], on Oct 22 18[illegible]

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,**		Stark Endrick — Age, 1 m 3 w
Date and Place of Death,†	*died at*	Huntsville Ark — Oct 20 — 1898.
Disease or Cause of Death, (*Primary and Secondary.*)‡	*of*	Hydrocephalus
Duration of Sickness,		3 weeks

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, J Johnson MD.

Date of Certificate, Oct 20 1898.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. May, 1893.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

Commonwealth of Massachusetts.

No.

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death,	October 21 1895
2. Name,	Jennie A. VanSchaick
(Maiden Name),*	Dillman
(Name of Husband),*	Edward
3. Sex, and whether single,	Female
Married, or Widowed,	Widowed
4. Color,†	White
5. Age,	85 Years, 8 Months, 4 Days.
(Disease or Cause of Death, (Primary and Secondary),‡	
6. Duration of Sickness,	
(By whom certified,	Dr Victor Smith M.D.
7. Residence,	Smithville N.Y.
8. Occupation,	Housework
9. Place of Death,	Hendricks Pa
10. Place of Birth,	Hendricks Pa
11. Name of Father,	
12. Name of Mother, (Maiden Name),	
13. Birthplace of Father,	
14. Birthplace of Mother,	
15. Place of Interment,	Adams N.Y.
Signature of Undertaker ~~or other person~~ making the Return,	Simon Fox

DATED at Smithville, on Oct 21 1895

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dyir immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificat stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician ne lects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceedi fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give be the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or negle to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such ci or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned an recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physicia cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or an physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as i required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*e and Age of Deceased,** Jerusha A. Van Schaack Age, 82-8-4

e and Place of Death,† died at Winthrop (35 Washington Ave Oct 21 1898,

ase or Cause of Death, - of abdominal Carcinoma (Cancer)
(Primary and Secondary.)‡

ration of Sickness, - - 3 yrs

I certify that the above is true, to the best of my knowledge and belief.

gnature and Residence of Certifying Physician, B. H. Metcalf M.D.

Date of Certificate, Oct 24 1898.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1898.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE OF THE CAUSE OF DEATH.

Winthrop Oct. 23' 189 8.
Boston,

Name and age of deceased: William J. Martyn Age 55 yrs. mos. dys.

Date and place of death: Oct. 23' 98 — Court Park Road. Winthrop

Disease or cause of death: Tuberculosis of the Lungs

*Duration of disease:** A year or more.

I certify that the above is true, to the best of my knowledge and belief.

Name and residence of physician. Albert B. Donnan M. D.
66 Winthrop St. Winthrop Mass

* It is very desirable to be informed of the duration of the disease.

The office of the Board of Health will be open for the granting of permits for burial, as follows: — Saturdays, 9 A.M. till 2 P.M., except during the months of June, July, August and September, when the office will be closed on Saturdays at 12 M.; Sundays, 10 A.M. till 12 M.; Holidays, from 10 A.M. till 12 M.; other days, from 9 A.M. till 5 P.M.

UNDERTAKER'S RETURN.—~~Boston.~~

Date of death, Oct 23 1898. Name, William H. Martyn

Maiden name,* Sex, M.

Married, ~~single~~, or ~~widow~~ of ~~wife of~~

Color, W Age, 55 years, mos., days. Residence, Winthrop

Place of death (street and number), Court ~~Place~~ Road ward

Place of birth, England Occupation,

Name of father, William H Maiden name of mother, Mary Ann

Birthplace of father, England Birthplace of mother, England

Place of interment,† Manchester N. H.

*If a married woman or a widow. †Give the name of the burial ground.

E G Brown, *Undertaker.*

Commonwealth of Massachusetts.

~~CITY OF CHELSEA.~~ Town of Winthrop

RETURN OF A DEATH

TO THE BOARD OF HEALTH.

[Fill out with Ink.]

Date of Death, Oct 25 1898

Name, Lydia D. Colby

Maiden Name, {If a married woman or widow.} Lydia D.

If Married Woman, {Husband's Name.} Lorenzo D. Colby

Sex, and whether Single, Married or Widowed, F.

Color, W. *Age,* 82 (23) *Years,* 8 *Months,* 22 *Days.*

Place of Death, (St. and No.), 7 Myrtle Ave. Winthrop Mass

Occupation, —

Birthplace, Unknown

Name of Father, — " "

Maiden Name of Mother, — " "

Birthplace of Father, — " "

" " *Mother,* — " "

Place of Interment, Woodlawn Cemetery

Signature of Undertaker or other person making the return.

Herbert H. Carter

Undertaker.

Chelsea, Mass., Oct. 27 1898

Edith F. Cobb

Oct 25/1906

PHYSICIAN'S CERTIFICATE.

Name of Deceased, Lydia D. Colby

Date and Place of Death, Oct 25 - 1898. Winthrop, Mass

Disease or Cause of Death, Cirrhosis of Liver.

Duration of Sickness, 4 Months

I certify that the above is true, to the best of my knowledge and belief.

Charles Leeds. M.D.
Physician.

Date of Certificate, Oct. 27 1898 Chelsea

Capt. S. Colby

Oct 25/1876

PHYSICIAN'S CERTIFICATE.

Name of Deceased, Lydia D. Colby

Date and Place of Death, Oct 25-1898. Winthrop, Mass

Disease or Cause of Death, Cirrhosis of Liver.

Duration of Sickness, 4 Months

I certify that the above is true, to the best of my knowledge and belief.

Charles Leeds, M.D.
Physician.

Date of Certificate, Oct. 27 1898 Chelsea

PHYSICIAN'S CERTIFICATE OF THE CAUSE OF DEATH.

Boston, Oct 26th 1898.

Name and age of deceased: Lillian Grace Murphy Age 8 yrs. mos. dys.

Date and place of death: Oct 26th 1898. Neptune Ave.

Disease or cause of death: Acute Gastro-enteritis and Heathrop Mass.
Marasmus.

*Duration of disease:** 10 hours

I certify that the above is true, to the best of my knowledge and belief.

Name and residence of physician. C. E. Johnson M. D.

*It is very desirable to be informed of the duration of the disease.

The office of the Board of Health will be open for the granting of permits for burial, as follows: — Saturdays, 9 A.M. till 2 P.M.; Sundays, 10 A.M. till 12 M. Holidays, from 10 A.M. till 12 M.; other days, from 9 A.M. till 5 P.M.

UNDERTAKER'S RETURN.—Boston.

Date of death, Oct 26th 1898, Name, Lillian Grace Murphy

Maiden name,* ..... Sex, Fem

Married, single, or widow of Single wife of .....

Color, W Age, — years, 8 mos., ... days. Residence, Winthrop, Mass,

Place of death (street and number), Hatfield Ave ward .....

Place of birth, Somerville Occupation, Trader

Name of father, F. Monroe Maiden name of mother, Celia L. Dalton

Birthplace of father, Pelham, Mass Birthplace of mother, Ireland

Place of interment,† Mt. Benedict, Cem

* If a married woman or a widow. † Give the name of the burial ground.

Signature of Undertaker: Frank S. Maloney.

PHYSICIAN'S CERTIFICATE OF THE CAUSE OF DEATH.

Winthrop

Boston, Nov. 16th 1898.

Name and age of deceased: John McGrail Age 22 yrs. 6 mos. dys.

Date and place of death: Nov. 15th U.S. Army Hospital Winthrop

Disease or cause of death: Pneumonia

*Duration of disease:**

I certify that the above is true, to the best of my knowledge and belief.

Name and residence of physician. Francis A. Harris M. D.
Act'g Asst Surgeon U.S. Army

*It is very desirable to be informed of the duration of the disease.

The office of the Board of Health will be open for the granting of permits for burial, as follows: — Saturdays, 9 A.M. till 2 P.M., except during the months of June, July, August and September, when the office will be closed on Saturdays at 12 M.; Sundays, 10 A.M. till 12 M.; Holidays, from 10 A.M. till 12 M.; other days, from 9 A.M. till 5 P.M.

UNDERTAKER'S RETURN.—~~Boston~~. Winthrop, Mass.

Date of death, November 15th 1895 Name, John McGrail

Maiden name,* Sex, Male

~~Married~~, single, ~~or widow of~~ ~~wife of~~

Color, White Age, 22 years, 6 mos., days. Residence, Army,

Place of death (street and number), Summit Ave Winthrop Mass, ward

Place of birth, East Pepperell, Mass. Occupation, Shoemaker

Name of father, Maiden name of mother,

Birthplace of father, Birthplace of mother,

Place of interment,† East Pepperell, Mass

*If a married woman or a widow. † Give the name of the burial ground.

John J Morris Undertaker.

Mar 15 1878

PHYSICIAN'S CERTIFICATE OF THE CAUSE OF DEATH.

Boston, Nov 20 1898

Name and age of deceased: Henry F. Jones Age 40 yrs. 7 mos. 13 dys.

Date and place of death: Nov 20 1898 at Winthrop (Somerset Ave)

Disease or cause of death: Gastritis & Meningitis

*Duration of disease:** Sudden

I certify that the above is true, to the best of my knowledge and belief.

Name and residence of physician. A E Bagdon East Boston M. D.

*It is very desirable to be informed of the duration of the disease.

The office of the Board of Health will be open for the granting of permits for burial, as follows:—Saturdays, 9 A.M. till 2 P.M., except during the months of June, July, August and September, when the office will be closed on Saturdays at 12 M.; Sundays, 10 A.M. till 12 M.; Holidays, from 10 A.M. till 12 M.; other days, from 9 A.M. till 5 P.M.

UNDERTAKER'S RETURN. ~~Boston.~~

Date of death, Nov 20 1898 Name, Henry S. Jones.

Maiden name,* ~~~~ Sex, Male

Married, ~~single, or widow of~~ ~~~~ wife of ~~~~

Color, White Age, 40 years, 7 mos., 13 days. Residence, 24 Somerset Ave. Winthrop

Place of death (street and number), Same. ward ~~~~

Place of birth, England Occupation, Insurance Agent.

Name of father, Thomas F. Maiden name of mother, Ellen Parish

Birthplace of father, England Birthplace of mother, England

Place of interment,† Winthrop Cemetery.

*If a married woman or a widow. †Give the name of the burial ground.

Jerome S. Morse Undertaker.

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	December 5th 1898
2. Name, ...	Alert Elwood
(Maiden Name),* .	
(Name of Husband),*	
3. Sex, and whether single, Married, or Widowed,	Male
4. Color,†	White
5. Age, ...	Years, Months, 6 Days
6. Disease or Cause of Death, (Primary and Secondary),‡ Duration of Sickness, .	Dr H J Soule
By whom certified, .	
7. Residence, ...	Elmwood Ave
8. Occupation, ...	
9. Place of Death, . . .	Elmwood Ave
10. Place of Birth, . . .	Elmwood Ave
11. Name of Father, . .	Joseph W. Elwood
12. Name of Mother, . . (Maiden Name),	Mary M. Williams
13. Birthplace of Father, .	Bedford Mass
14. Birthplace of Mother, .	Gloucester Mass
15. Place of Interment, .	
Signature of Undertaker ~~or other person~~ making the Return, ...	Sumner Floyd

DATED at Winthrop, on Dec 7th, 1898.

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Albert Elwood Age, 6 d 2y

Date and Place of Death,† - died at Wittop Dec 5 189 ,

Disease or Cause of Death, - of congenital cleft-palate Malnutrition
(Primary and Secondary.)‡

Duration of Sickness, - -

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Grace Palmer M.D. Wittop

Date of Certificate, Dec 189 .

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December. 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	December 8th 1898
2. Name, ...	Olive A. Melvin
(Maiden Name),* .	Royal
(Name of Husband),*	Hezekiah B. Corliss
3. Sex, and whether single,	Female
Married, or Widowed,	Indian
4. Color,†	White
5. Age, ...	67 Years, 8 Months, 2 Days
(Disease or Cause of Death, (Primary and Secondary),‡	
6. Duration of Sickness, .	
By whom certified, .	
7. Residence, ...	Yarmouth Me
8. Occupation, ...	—
9. Place of Death, . . .	Cor in Old Freeport Me
10. Place of Birth, . . .	Freeport Me
11. Name of Father, . .	Isaac Royal
12. Name of Mother, . . (Maiden Name).	Hepsa Gooding
13. Birthplace of Father, .	
14. Birthplace of Mother, .	
15. Place of Interment, .	Yarmouth Me
Signature of Undertaker or other person making the Return, ...	Sumner Floyd

Dated at Winthrop, on Dec 9 1898

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Olive A Conlise *Age,* 67-8-3

Date and Place of Death,† - *died at* Winthrop (Coradi) Dec ~~28~~ 8 *1898,*

Disease or Cause of Death, - *of* Endocarditis (Chronic) Primary
(Primary and Secondary.)‡ & Secondary

Duration of Sickness, - -

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Horace L. Soule M.D.

Date of Certificate, Dec 9th *1898.*

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed December, 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

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RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	Dec. 9th 1898
2. Name, ...	George Colton
(Maiden Name),* .	
(Name of Husband),*	
3. Sex, and whether single, Married, or Widowed,	Male
4. Color,†	White
5. Age, ...	80 Years, 1 Month, 2 Days.
(Disease or Cause of Death, (Primary and Secondary),‡ 6. Duration of Sickness, .	Ten Days
(By whom certified, .	
7. Residence, ...	No. 7 Cottage Park Road
8. Occupation, ...	Pharmacist
9. Place of Death, . . .	West Roxbury Mass
10. Place of Birth, . . .	Springfield Mass.
11. Name of Father, . .	George Colton
12. Name of Mother, . . (Maiden Name),	Lucretia L. Hoyt.
13. Birthplace of Father, .	Longmeadow Mass
14. Birthplace of Mother, .	Deerfield "
15. Place of Interment, .	Springfield "
Signature of Undertaker ~~or other person~~ making the Return, . . .	Sumner Floyd

DATED at Winthrop, on Dec 10 1898

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896. — 5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

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PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** George Collar Age, 80—1—2

Date and Place of Death,† - *died at* Winthrop Ct Park Road Dec 9" 1898.

Disease or Cause of Death, - *of* Old age
(Primary and Secondary.)‡

Duration of Sickness, - -

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Horace F Dowse Winthrop Mass

Date of Certificate, Dec 12 1898.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

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RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . . January 17th 1898
2. Name, ... Charles R. Bates
   (Maiden Name),* .
   (Name of Husband),*
3. Sex, and whether single, Male
   Married, or Widowed, Married
4. Color,† . . . . . White
5. Age, ... 49 Years, — Months, 2 Days.
6. Disease or Cause of Death, (Primary and Secondary),‡ Dr. Hall
   Duration of Sickness, .
   By whom certified, . Dr. Hall
7. Residence. . . . . Boston
8. Occupation, ... Painter
9. Place of Death, . . . Boston
10. Place of Birth. . . . Boston
11. Name of Father. . . Charles R. Bates
12. Name of Mother, . . Mary E. Bates
    (Maiden Name),
13. Birthplace of Father, .
14. Birthplace of Mother, .
15. Place of Interment, .

Signature of Undertaker ~~or other person~~ making the Return, ... Edward Floyd

DATED at Boston, on January 17, 1898

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

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SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Charlee R. Baker Age, 49 yrs - 2 dz

Date and Place of Death,† died at 20 Winthrop Pleasant St Dec 17th 1898,

Disease or Cause of Death, (*Primary and Secondary.*)‡ of Pneumonia (lobar)

Duration of Sickness, 4 days

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, B. H. Metcalf M.D. H

Date of Certificate, Dec 17 1898.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

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No.

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	December 18th 1898
2. Name, ...	Katharine M. Schumacher
(Maiden Name),* .	Nor
(Name of Husband),*	Adolf Schumacher
3. Sex, and whether single,	Female
Married, or Widowed,	Married
4. Color,†	White
5. Age, ...	31 Years, 9 Months, 11 Days.
(Disease or Cause of Death, (Primary and Secondary),‡	
6. Duration of Sickness, . .	Dr A. B. Doman
(By whom certified, .	
7. Residence, ...	Sargent Street
8. Occupation, ...	
9. Place of Death, . . .	Sargent Street
10. Place of Birth, . . .	Haverhill Mass
11. Name of Father, . .	Calvin Elden
12. Name of Mother, . . (Maiden Name),	Isabelle Nor
13. Birthplace of Father. .	Haverhill Mass
14. Birthplace of Mother, .	Halowell Mass
15. Place of Interment, .	Haverhill Mass Linwood Cemetery
Signature of Undertaker ~~or other person~~ making the Return, ...	Sumner Floyd

DATED at Winthrop, on Dec 19th 1898

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

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SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Katharine W. Schumacher Age, 31-9-11

Date and Place of Death,† - *died at* Montrose Parget Lt Dec 18 189 1898

Disease or Cause of Death, - *(Primary and Secondary.)‡* Anaemia complicating pregnancy, post-partal hemorrhage of complicating labor. Final cause syncope, heart-failure.

Duration of Sickness, - - 19 Days from birth of child.

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Albert B. Dorman, M.D.

Date of Certificate, Dec 20th 189 8.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

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RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . . December 26 1898
2. Name, ... Carrie Cate Ames
   (Maiden Name),* .
   (Name of Husband),*
3. Sex, and whether single, female
   Married, or Widowed, widowed
4. Color,† . . . . . W
5. Age, ... ~~Years,~~ 1 Months, 19 Days.
6. Disease or Cause of Death, (Primary and Secondary),‡ Gr P 15
   Duration of Sickness, .
   By whom certified, . Dr Sturgis
7. Residence, ... 22 Sturgis St
8. Occupation, ...
9. Place of Death, . . . 22 Sturgis St
10. Place of Birth, . . . 22 Sturgis St
11. Name of Father, . . Edward E. Ames
12. Name of Mother, . . Carrie W Bates
    (Maiden Name).
13. Birthplace of Father, . Port Dauphin N S
14. Birthplace of Mother, . Lunenburg
15. Place of Interment, . Forest Hills

Signature of Undertaker ~~or other person~~ making the Return, ...

DATED at Boston, on Dec 27 18 98.

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

Be very particular to fill all Blanks.

Plate. Ed. Dec., 1896.—5,000

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Carrie Carr Clues Age, 7 wks.

Date and Place of Death,† - died at Winthrop Beach, Dec. 26th 1898,

Disease or Cause of Death, - of Gastro-enteritis
(Primary and Secondary.)‡

Duration of Sickness, - - Two days.

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Wm J. Porter Winthrop.

Date of Certificate, Dec 27th 1898.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . . December 27th 1896
2. Name, ... Walter R. Holee
   (Maiden Name),* . . . . . ~~
   (Name of Husband),* . . . . . 11 mo.
3. Sex, and whether single, Male 17
   Married, or Widowed, Single
4. Color,† . . . . . White
5. Age, ... 16 Years, 4 Months, 11 Days.
6. (Disease or Cause of Death, (Primary and Secondary),‡ Diphtheria
   Duration of Sickness, .
   By whom certified, .
7. Residence, ... Concord Mass
8. Occupation, ... Clerk
9. Place of Death, . . 31 Leonard Mass
10. Place of Birth, . . . East Lexington
11. Name of Father, . . Robert Holee
12. Name of Mother, . . Mary M. Holee
    (Maiden Name),
13. Birthplace of Father, . Worcester Mass
14. Birthplace of Mother, . Hebron ?
15. Place of Interment. . Woodlawn

Signature of Undertaker or other person making the Return, . . . Dunne & Floyd

DATED at Concord, on Dec 31 1896

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or an physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Walter H. Noble Age, 16 yrs

Date and Place of Death,† - died at Winthrop Dec 28th 1898 ,

Disease or Cause of Death, - of Tuberculosis of the Lungs. Pneumonia.
(Primary and Secondary.)‡

Duration of Sickness, - - A few months. Final Sickness three days.

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Albert B. Dorman, Md.

Date of Certificate, Dec. 30th 1898.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896. — 5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . . 9 1
2. Name, ... [illegible]
   (Maiden Name),* . [illegible]
   (Name of Husband),* [illegible]
3. Sex, and whether single, [illegible]
   Married, or Widowed,
4. Color,† 15
5. Age, ... 94 Years, Months, 7 Days
6. (Disease or Cause of Death, (Primary and Secondary),‡ [illegible]
   Duration of Sickness, . [illegible]
   By whom certified, .
7. Residence, ... [illegible]
8. Occupation, ...
9. Place of Death, . . . [illegible]
10. Place of Birth, . . . [illegible]
11. Name of Father, . . [illegible]
12. Name of Mother, . . [illegible]
    (Maiden Name).
13. Birthplace of Father, . [illegible]
14. Birthplace of Mother, . [illegible]
15. Place of Interment, . [illegible]

Signature of Undertaker or other person making the Return, ...

DATED at Wrentham, on 10 18 .

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

Be very particular to fill all Blanks.

Plate. Ed. Dec., 1896.—5,000

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263*

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for regi tration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his ag[illegible] disease of which h died, the duration of his last sickness, and the date of his decease; and a physician who has attended a[illegible]rth of a child dyin immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for [illegible]tration a certificat stating to the best of his knowledge and belief the fact that such a child died after birth or was born de[illegible] If a physician neg lects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punishe[illegible] a fine not exceedin fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the p[illegible]ician shall give bot the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physic[illegible] refuses or neglect to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in w[illegible] he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a[illegible]man body until h has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board [illegible]ealth in such cit or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent o clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned an recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physicia cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or a physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate a required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the sa When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall fo with countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so gi shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as th clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceed ing fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Mary C. Charles Age,

Date and Place of Death,† - died at Prospect Av. Westfield, Mass. Jan. 9th 1897,

Disease or Cause of Death, - of Old age

(Primary and Secondary.)‡‡

Duration of Sickness, - - Final sickness two weeks.

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Albert B. Dorman, M.D.

Date of Certificate, Jan. 13th 1897.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896. — 5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

Commonwealth of Massachusetts.

No.

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death,	January 17th 1898
2. Name,	Stillborn Infant Lo
(Maiden Name),*	Herbert Baxter
(Name of Husband),*	
3. Sex, and whether single,	Female
Married, or Widowed,	
4. Color,†	White
5. Age,	Stillborn ~~Months~~, ~~Days~~.
(Disease or Cause of Death, (Primary and Secondary),‡	
6. Duration of Sickness,	
(By whom certified,	
7. Residence,	Sea Foam Ave 2nd house from Shirley
8. Occupation,	
9. Place of Death,	Sea Foam ave
10. Place of Birth,	Sea Foam Ave
11. Name of Father,	Herbert W. Baxter
12. Name of Mother, (Maiden Name),	Bessie C Wilde
13. Birthplace of Father,	St John N B
14. Birthplace of Mother,	St John N B.
15. Place of Interment,	Winthrop Cemetery
Signature of Undertaker ~~or other person~~ making the Return,	Sumner Floyd

DATED at Winthrop, on Jan 17 1898

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** (Female) Bayler *Age,*

Date and Place of Death,† - *died at* Kentrop January 7 *1899,*

Disease or Cause of Death, - *of*
(Primary and Secondary.)‡

Duration of Sickness, - -

Still Born

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, P. C. Johnson Kentrop

Date of Certificate, February 3 *1899.*

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

Commonwealth of Massachusetts.

No. .....

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	January 18th 1899
2. Name, ...	Lillian Lucilla Pope
(Maiden Name),* .	
(Name of Husband),*	
3. Sex, and whether single,	Female
Married, or Widowed,	
4. Color,†	White
5. Age, ...	15 Years, 2 Months, 19 Days.
(Disease or Cause of Death, (Primary and Secondary),‡	Lobar Pneumonia
6. Duration of Sickness. .	Eight days
(By whom certified, .	Winthrop Highlands
7. Residence, ...	Winthrop Highlands
8. Occupation, ...	
9. Place of Death, . . .	Winthrop Highlands
10. Place of Birth, . . .	Malden
11. Name of Father, . .	Thrend C. J. Pope
12. Name of Mother, . . (Maiden Name),	Amanda C. Schadt
13. Birthplace of Father, .	New York City
14. Birthplace of Mother. .	Allentown, Pa.
15. Place of Interment, .	Winthrop Cemetery
Signature of Undertaker ~~or other person~~ making the Return, ...	Sumner Floyd

DATED at Winthrop, on Jan 19 1899

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896. — 5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Lillian Lucille Pope — *Age,* 1 yrs 4 mos

Date and Place of Death,† - *died at* Winthrop, Jan. 18th — 1899,

Disease or Cause of Death, - *of* Lobar Pneumonia
(*Primary and Secondary.*)‡

Duration of Sickness, - - Eight days (?)

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, W. J. Porter, Winthrop Beach

Date of Certificate, Jan 19th 1899.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion

Plate. Ed. December, 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

No. ...

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death,	January 19" 1899
2. Name,	Winifred Gibbons
(Maiden Name),*	
(Name of Husband),*	
3. Sex, and whether single,	Female
Married, or Widowed,	
4. Color,†	White
5. Age,	4 Years, 4 Months, 28 Days.
(Disease or Cause of Death, (Primary and Secondary),‡	
6. Duration of Sickness,	
(By whom certified,	
7. Residence,	84 Pleasant Street
8. Occupation,	
9. Place of Death,	84 Pleasant Street
10. Place of Birth,	Homelsville N.Y.
11. Name of Father,	Bernard J Gibbons
12. Name of Mother. (Maiden Name),	Anna E. Webber
13. Birthplace of Father,	Milford Mass
14. Birthplace of Mother,	Homelsville N.Y.
15. Place of Interment,	Milford Mass
Signature of Undertaker ~~or other person~~ making the Return,	Sumner Floyd

DATED at Wi[illegible]p, on January 20 1899

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or a physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Winnefred Gibbons Age, 4 yrs. 4 mos

Date and Place of Death,† - *died at* 84 Pleasant St., Winthrop, Mass. Jan 19 1899, O

Disease or Cause of Death, - *of* Convulsions
(Primary and Secondary.)‡

Duration of Sickness, - - 24 hours

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Albert B. Dorman, M. D.

Date of Certificate, 1-21- 1899.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

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Commonwealth of Massachusetts.

No. 11—19

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . . Jan 24 1899
2. Name, ... Jane ~~Hall~~ Hall
   (Maiden Name),* . Unk
   (Name of Husband),* Wid
3. Sex, and whether single, Female
   Married, or Widowed, Widow
4. Color,† . . . . . Wht.
5. Age, ... 77 Years, 2 Months, 17 Days
6. (Disease or Cause of Death, (Primary and Secondary),‡ Duration of Sickness, .
   By whom certified, .
7. Residence, ... Douglas St
8. Occupation, ...
9. Place of Death, . . . Douglas St
10. Place of Birth, . . . Mass
11. Name of Father, . . Unk
12. Name of Mother, . . Unk
    (Maiden Name).
13. Birthplace of Father, . Scotland
14. Birthplace of Mother, . Scotland
15. Place of Interment, . Attleb

Signature of Undertaker ~~or other person making~~ the Return, ...

DATED at Worcester, on Jan 26, 18 99.

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Jane Smith Age, 77-11

Date and Place of Death,† - *died at* Westerly Jan 20nd 1899,

Disease or Cause of Death, - *of* Chronic Interstitial Nephritis
(Primary and Secondary.)‡

Duration of Sickness, - - One year or more

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Horace J. Seale M.D.

Date of Certificate, Jan 9 1899.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

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No.

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death,	January 31 1899
2. Name,	George Tumbull
(Maiden Name),*	
(Name of Husband),*	
3. Sex, and whether single, Married, or Widowed,	Male, Married White
4. Color,†	
5. Age,	83 Years, — Months, — Days.
Disease or Cause of Death, (Primary and Secondary),‡ 6. Duration of Sickness,	
By whom certified,	
7. Residence,	Winthrop Mass
8. Occupation,	Tailor
9. Place of Death,	Bancroft St.
10. Place of Birth,	Portsmouth England
11. Name of Father,	George Tumbull
12. Name of Mother, (Maiden Name),	Jane Burbage
13. Birthplace of Father,	England
14. Birthplace of Mother,	England
15. Place of Interment,	Winthrop Cemetery
Signature of Undertaker ~~or other person~~ making the Return,	Sumner Floyd

DATED at Winthrop, on Feb 1st 1899

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

Be very particular to fill all Blanks.

Plate. Ed. Dec., 1896.—5,000

5-6-98 461-
Boy. —

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

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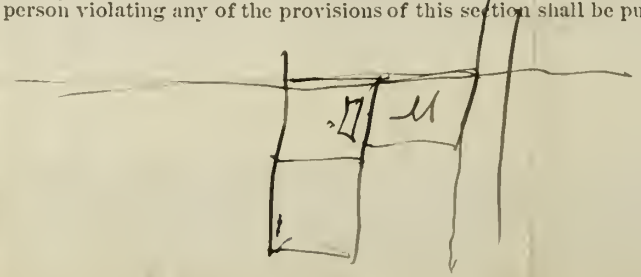

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** George Turnbull *Age,* 83 yrs

Date and Place of Death,† - *died at* Winthrop Mass *Jany* 31 *1899*,

Disease or Cause of Death, - *of* Senility and Brights Disease
(Primary and Secondary.)‡

Duration of Sickness, - - about 3 months

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, F. E. Johnson MD Winthrop

Date of Certificate, Feby 3 *1899*.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

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No.

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death,	February 1st. 1899
2. Name,	Ann Sampson
(Maiden Name),*	Ann Weston
(Name of Husband),*	Elisha Sampson
3. Sex, and whether single,	Female
Married, or Widowed,	Widowed
4. Color,†	
5. Age,	81 Years, 5 Months, 9 Days.
Disease or Cause of Death, (Primary and Secondary),‡	
6. Duration of Sickness,	
By whom certified,	
7. Residence,	Duxbury Mass
8. Occupation,	
9. Place of Death,	Winthrop Mass
10. Place of Birth,	Duxbury
11. Name of Father,	Joseph Weston
12. Name of Mother, (Maiden Name),	Annie Cushman
13. Birthplace of Father,	Duxbury
14. Birthplace of Mother,	Duxbury
15. Place of Interment,	Duxbury
Signature of Undertaker ~~or other person~~ making the Return,	Sumner Floyd

DATED at Winthrop, on Feb 2nd 1899

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

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PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Ann Sanders Age, 81 y 5 mo 9 da

Date and Place of Death,† - died at Dunbar's Feb 1st 1899.

Disease or Cause of Death, (*Primary and Secondary.*)‡ - *of* Influenza

Duration of Sickness, - - 4 weeks

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Horace P Soule M.D.

Date of Certificate, Feb 7 1899.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December. 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement thereiu, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebelliou, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

No.

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death,	February 2" 1899
2. Name,	Gillon Infant
(Maiden Name),*	
(Name of Husband),*	
3. Sex, and whether single,	Male
Married, or Widowed,	
4. Color,†	White
5. Age,	~~Years~~ Months ~~Days~~.
(Disease or Cause of Death, (Primary and Secondary),‡ 6. Duration of Sickness,	D r B H. Metcalf
(By whom certified,	
7. Residence,	Winthrop Mass
8. Occupation,	
9. Place of Death,	22 Marshall St
10. Place of Birth,	22 Marshall St
11. Name of Father,	F. Henry MacKell
12. Name of Mother, (Maiden Name),	Mary Jane Sutherland
13. Birthplace of Father,	England
14. Birthplace of Mother,	Cape Breton
15. Place of Interment,	Winthrop Cemetery
Signature of Undertaker ~~*or other person*~~ *making the Return*,	Sumner Floyd

Dated at Winthrop, on Feb 2" 1899

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

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PHYSICIAN'S CERTIFICATE OF THE CAUSE OF DEATH.

Boston, Feb 22nd 11 189 9

Name and age of deceased: Elijah Th. Pettis. Age 35 yrs. 9 mos. 21 dys.

Date and place of death: Feb 21 1899. 34 Rudsel Matthews Mass.

Disease or cause of death: Pneumonia.

Duration of disease:* 6 or 7 days.

I certify that the above is true, to the best of my knowledge and belief.

Name and residence of physician. M W Dickson 50 Warwick Sym. M. D

*It is very desirable to be informed of the duration of the disease.

UNDERTAKER'S RETURN.—Boston.

Date of death, Feb 21 1899 Name, Elizabeth Potter

Maiden name,* Elizabeth Furlong Sex, Female

Married, single, or widow of ——— wife of Thomas H. Potter

Color White Age, 35 years, 9 mos., 21 days. Residence, Orient Heights

Place of death (street and number) 34 Road St. Winthrop ward ———

Place of birth, Cape Breton Occupation, ———

Name of father John Furlong Maiden name of mother, Mary Joyce

Birthplace of father, Cape Breton Birthplace of mother, Cape Breton

Place of interment,† Holy Cross Malden

*If a married woman or a widow. †Give the name of the burial ground.

Signature of Undertaker: James P Cross

PHYSICIAN'S CERTIFICATE OF THE CAUSE OF DEATH.

Boston, Feb 1 37 189 .

Name and age of deceased: [illegible] Jan Age 89 yrs. — mos. — dys.

Date and place of death: 17 Culver St. Ventura E

Disease or cause of death: Apoplexy

Duration of disease:* 24 hours

I certify that the above is true, to the best of my knowledge and belief.

Name and residence of physician. C. E. Johnson M. D

Chestnut & Fast

*It is very desirable to be informed of the duration of the disease.

The office of the Board of Health will be open for the granting of permits for burial, as follows: — Saturdays, 9 A.M. till 2 P.M.; Sundays, 10 A.M. till 12 M. Holidays, from 10 A.M. till 12 M.; other days, from 9 A.M. till 5 P.M.

UNDERTAKER'S RETURN.—Boston.

Date of death, Feb. 26th 1899 Name, Patrick Farrell

Maiden name,* — Sex, Male

Married, single, or widow of Widower wife of —

Color, White Age, 89 years, — mos., — days. Residence, Brighton

Place of death (street and number), 17 Custer St ward —

Place of birth, Ireland Occupation, Farmer

Name of father, Patrick Farrell Maiden name of mother, Mary Farrell

Birthplace of father, Ireland Birthplace of mother, Ireland

Place of interment,† Cath. Cem.

*If a married woman or a widow. †Give the name of the burial ground.

Signature of Undertaker: John E. Bolger

No. .....

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, ...
2. Name, ...
   (Maiden Name),* .
   (Name of Husband),*
3. Sex, and whether single, Married, or Widowed,
4. Color,† . . . . .
5. Age, ... 67 Years. 5 Months, 14 Days.
6. (Disease or Cause of Death, (Primary and Secondary),‡ Duration of Sickness. .
   (By whom certified, .
7. Residence, ...
8. Occupation, ...
9. Place of Death, . . .
10. Place of Birth, . . .
11. Name of Father, . .
12. Name of Mother, . . (Maiden Name),
13. Birthplace of Father. .
14. Birthplace of Mother. .
15. Place of Interment, .

Signature of Undertaker or other person making the Return. . . . .

DATED at ....., on ..... 18..

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Frank E. Bennett Age, 67-5-14

Date and Place of Death,† - died at Winthrop (14 Pleasant St) March 22" 1899.

Disease or Cause of Death, - of Cirrhosis of Liver with Sarcoma
(Primary and Secondary.)‡

Duration of Sickness, - - A year or more

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Albert B. Dorman, M.D

Date of Certificate, 3-24- 1899.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

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No. ...

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	March 27
2. Name, ...	Flora L. Hammond
(Maiden Name),* .	Skinner
(Name of Husband),*	Louis D. Hammond
3. Sex, and whether single,	Female
Married, or Widowed,	Married
4. Color,†	W
5. Age, ...	30 Years, 4 Months, 27 Days.
(Disease or Cause of Death, (Primary and Secondary),‡	Dr Mellen
6. Duration of Sickness, .	
(By whom certified, .	
7. Residence, ...	
8. Occupation, ...	
9. Place of Death, . . .	153 Court St
10. Place of Birth, . . .	Sandwich N.H.
11. Name of Father, . .	Daniel M. Skinner
12. Name of Mother, . . (Maiden Name),	Sarah P. Skinner
13. Birthplace of Father, .	Sandwich N.H.
14. Birthplace of Mother, .	Conway N.H.
15. Place of Interment, .	Laurel Hill Cem
Signature of Undertaker ~~or other person~~ making the Return, ...	Sumner Ford

DATED at Boston, on March 27, 18 87.

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall carry in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Flora S. Hammond *Age,* 50- 4 mos 28 days

Date and Place of Death,† - *died at* 152 Locust St Winthrop Mass March 29th *1899* .

Disease or Cause of Death, - *of* abdominal Carcinoma
(Primary and Secondary.)‡

Duration of Sickness, - - one and one half years .

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, B. St. Metcalf. M.D. 52 Winthrop St Winthrop Mass

Date of Certificate, March 29th *1899* .

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

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No.

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	March 30th 1899
2. Name, ...	Lydia T. Crosby
(Maiden Name),* .	Haynes
(Name of Husband),*	John W.
3. Sex, and whether single,	Female
Married, or Widowed,	Widowed
4. Color,†	White.
5. Age, ...	79 Years, — Months, — Days.
(Disease or Cause of Death, (Primary and Secondary),‡	
6. Duration of Sickness, .	
(By whom certified, .	
7. Residence, ...	Weirthrop Mass
8. Occupation, ...	
9. Place of Death, . . .	35, Marshall Street
10. Place of Birth, . . .	Weirthrop Mass
11. Name of Father, . .	Johnathan Haynes
12. Name of Mother, . . (Maiden Name),	Sarah Wiley
13. Birthplace of Father, .	York Maine
14. Birthplace of Mother, .	Weirthrop Mass
15. Place of Interment, .	Brighton Mass
Signature of Undertaker ~~*or other person*~~ *making the Return*, . . .	Sumner Floyd

Dated at Weirthrop, on March 30 1899

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

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PHYSICIAN'S CERTIFICATE.

Name and Age of Deceased,† Lydia T. Crosby. Age, 77 Y. ~ M. ~ D.

Place and Date of Death,‡ died at Winthrop (Marshall St) Mar 30, 1899

Disease or Cause of Death,§ old age, Cardiac failure.

Duration of sickness, one week.

I certify that the above is true to the best of my knowledge and belief.

Signature and Residence of Certifying Physician. B. H. Metcalf M.D. M. D.
32 Winthrop St Winthrop

Date of Certificate, april 1st 1899.

† First Name, Middle and Surname in full.

R

at

Date,

Filed,

The provisions of chapter 444 of the
oldest person next of kin present at the tim
which a death occurs, shall, within five days
the clerk of the city or town in which the d

The commanding officer of a vessel sh
or to the clerk of the city or town within th

Penalty for neglect to comply with th

A physician who has attended a per
request, furnish for registration a certificate

Penalty for refusal or neglect, ten dol

Any person having charge of the funer
certificate made in accordance with section
health or to the clerk of the city or town in

No.

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	March 31" 1899
2. Name, ...	Alexander Webber
(Maiden Name),* .	
(Name of Husband),*	
3. Sex, and whether single, Married, or Widowed,	Male Married
4. Color,†	White
5. Age, ...	60 Years, 6 Months, 13 Days
Disease or Cause of Death, (Primary and Secondary),‡ 6. Duration of Sickness, .	
By whom certified, .	
7. Residence, ...	Weythrop Mass
8. Occupation, ...	Laborer
9. Place of Death, . . .	30, Center Street
10. Place of Birth, . . .	Shapleigh Me
11. Name of Father, . .	Elder Webber
12. Name of Mother, . . (Maiden Name),	Abagail Mason
13. Birthplace of Father, .	Shapleigh Me
14. Birthplace of Mother, .	" "
15. Place of Interment, .	Winthrop Cemetery
Signature of Undertaker ~~or other person~~ making the Return, ...	Sumner Floyd

DATED at Winthrop, on March 31 1899

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

Be very particular to fill all Blanks.

Plate. Ed. Dec., 1896.—5,000

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

Funeral Sunday Dec 3rd
3 P.M.
Funeral at Home

PHYSICIAN'S CERTIFICATE OF THE CAUSE OF DEATH.

Winthrop ~~Boston~~, April 1st 1899

Name and age of deceased: Alexander Webber Age 60 yrs. mos. dys.

Date and place of death: March 31st 1899 Winthrop

Disease or cause of death: Suicide - Gunshot

*Duration of disease:**

I certify that the above is true, to the best of my knowledge and belief.

Name and residence of physician. Francis A Harris M. D.
Med. Examiner

*It is very desirable to be informed of the duration of the disease.

The office of the Board of Health will be open for the granting of permits for burial, as follows: — Saturdays, 9 A.M. till 2 P.M., except during the months of June, July, August and September, when the office will be closed on Saturdays at 12 M.; Sundays, 10 A.M. till 12 M.; Holidays, from 10 A.M.

No.

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death,	April 2nd 1899
2. Name,	Susannah S Richardson
(Maiden Name),*	Floyd
(Name of Husband),*	Albert Richardson
3. Sex, and whether single, Married, or Widowed,	Female Widowed
4. Color,†	White
5. Age,	72 Years, 2 Months, 13 Days.
(Disease or Cause of Death, (Primary and Secondary),‡	
6. Duration of Sickness,	
(By whom certified,	Dr Medical
7. Residence,	Winthrop Mass
8. Occupation,	
9. Place of Death,	Winthrop Street Chelsea Mass
10. Place of Birth,	Chelsea Mass
11. Name of Father,	Samuel Floyd
12. Name of Mother, (Maiden Name),	
13. Birthplace of Father,	Chelsea Mass
14. Birthplace of Mother,	Chelsea Mass
15. Place of Interment,	Winthrop Cemetery
Signature of Undertaker ~~or other person~~ making the Return,	Sumner Floyd

DATED at Winthrop, on April 3rd 1899

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Susannah S Richardson *Age,* 72 yrs-2-13

Date and Place of Death,† - *died at* Winthrop Aprie 2 " 1899.

Disease or Cause of Death, - *of* Nephritis, Uraemia

(Primary and Secondary.)‡‡

Duration of Sickness, - ((Immediate) 48 hours.) Chronic.

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, B. H. Metcalf M.D. Winthrop & Winthrop

Date of Certificate, April 5 1899.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December. 1896. — 5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

No.

RETURN OF A DEATH.

To the Clerk of the Town in which the Death occurred.

1. Date of Death,	April 19th 1899
2. Name,	Malcolm Leare Donald
(Maiden Name),*	
(Name of Husband),*	
3. Sex, and whether single,	Male
Married, or Widowed,	
4. Color,†	White
5. Age,	Years, 8 Months, 12 Days.
6. Disease or Cause of Death, (Primary and Secondary),‡	
Duration of Sickness,	
By whom certified,	
7. Residence,	Winthrop, Mass
8. Occupation,	
9. Place of Death,	Court Road
10. Place of Birth,	" "
11. Name of Father,	David R. Donald
12. Name of Mother, (Maiden Name),	Flora A
13. Birthplace of Father,	
14. Birthplace of Mother,	
15. Place of Interment,	Winthrop Cemetery
Signature of Undertaker ~~or other person~~ making the Return,	Sumner Floyd

DATED at Winthrop, on April 20 1899

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. May, 1893.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263*

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Malcom Grant Donald Age, 8 mos 12 ds

Date and Place of Death,† - died at Winthrop (Court Road) April 19 " 1899.

Disease or Cause of Death, - of Pernicious ~~Cachexia~~ Anaemia
(Primary and Secondary.)‡

Duration of Sickness, - - about 2 months - Severe symp. 10 days

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, O. E. Johnson. M.D.

Date of Certificate, Apr 22 1899.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December. 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

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No. .....

RETURN OF A DEATH.

To the Clerk of the Town in which the Death occurred.

1. Date of Death,	April 23" 1899
2. Name,	Governeur Kent
(Maiden Name),*	
(Name of Husband),*	
3. Sex, and whether single, Married, or Widowed,	Male Married White
4. Color,†	
5. Age,	54 Years, 6 Months, 30 Days.
6. Disease or Cause of Death, (Primary and Secondary),‡ Duration of Sickness, By whom certified,	
7. Residence,	Peasal 21 – Cut Pale.
8. Occupation,	Dyers
9. Place of Death,	
10. Place of Birth,	New Orleans,
11. Name of Father,	Richard Kent
12. Name of Mother, (Maiden Name),	Hannah ~~Gilstrap~~ Hennessy
13. Birthplace of Father,	Maine,
14. Birthplace of Mother,	Connecticut
15. Place of Interment,	Greenland N.H.
Signature of Undertaker ~~or other person making~~ the Return,	S Lunn Fleyd

Dated at Fairhaven, on April 24 1899

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. May. 1893.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Gouverneur Kent Age, 54 ya 6m -

Date and Place of Death,† - died at Winthrop, (Pleasant St) April 23rd 1899.

Disease or Cause of Death, - of Chronic Interstitial Nephritis
(Primary and Secondary.)‡

Duration of Sickness, - - 3 years+

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, B Whitcalf M.D. 52 Winthrop St. Winthrop

Date of Certificate, April 23d 1899.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896. — 5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

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PHYSICIAN'S CERTIFICATE OF THE CAUSE OF DEATH.

Boston, May 6th 189 9

Name and age of deceased: William Mullory Age 76 yrs. — mos. — dys.

Date and place of death: May 5th 1899 47 Pleasant St Milton Mass

Disease or cause of death: Senility

Duration of disease: * about 2 months

I certify that the above is true, to the best of my knowledge and belief.

Name and residence of physician. Arthur Parks M.D.
98 Prescott

* It is very desirable to be informed of the duration of the disease. When more than one cause of death is mentioned state the duration of each.

The office of the Board of Health will be open for the granting of permits for burial, as follows: — Saturdays, 9 A.M. till 1 P.M., except during the months of June, July, August and Seotember, when the office will be closed on Saturdays at 12 M.; Sundays, 10 A.M. till 12 M.; Holidays, from 10 A.M.

UNDERTAKER'S RETURN.—Boston.

Date of death, May 5th 1899 Name, William Mulloy

Maiden ~~name~~,* Sex,

Married, ~~single, or widow~~ of ~~wife~~ of

Color, White Age, 76 years, — mos., — days. Residence, 47 Pleasant, Winthrop

Place of death (street and number), 47 Pleasant St Winthrop Ward

Place of birth, Ireland Occupation, Cooper

Name of father, (Unknown) Mulloy Maiden name of mother, Unknown

Birthplace of father, Ireland Birthplace of mother, Ireland

Place of interment,† Holy Cross Cemetery, Malden

* If a married woman or a widow. † Give the name of the burialground.

Undertaker.

No. .....

RETURN OF A DEATH.

To the Clerk of the Town in which the Death occurred.

1. Date of Death, . . .	May 7 "1899
2. Name, ...	Catharine Whittaker
(Maiden Name),* .	Griffin
(Name of Husband),*	Thomas
3. Sex, and whether single,	Female
Married, or Widowed,	Widowed
4. Color,†	White
5. Age, ...	35 Years, ~ Months, ~ Days.
6. Disease or Cause of Death, (Primary and Secondary),‡	
Duration of Sickness, .	
By whom certified, .	
7. Residence, ...	Whitney Mass
8. Occupation, ...	
9. Place of Death, . . .	Fremont St
10. Place of Birth, . . .	Roxbury Mass
11. Name of Father, . .	Unknown
12. Name of Mother, . (Maiden Name),	Unknown
13. Birthplace of Father,	Unknown
14. Birthplace of Mother, .	Unknown
15. Place of Interment, .	Holyoke Cemetery
Signature of Undertaker ~~or other person~~ making the Return, ...	James Floyd

DATED at Whitney, on May 7th 1899

* If a Married Woman or Widow. † If a Soldier who served in the War of the Rebellion.
‡ If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. May, 1893.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*ame and Age of Deceased,** Catharine Whitaker Age, 35 Years

ate and Place of Death,† - died at Winthrop May 7" 1899.

isease or Cause of Death, - of Burns
(Primary and Secondary.)‡

uration of Sickness, - - Ten days

I certify that the above is true, to the best of my knowledge and belief.

nature and Residence of Certifying Physician, Horace J. Sousa M D

Date of Certificate, May 5 1899.

r Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896. — 5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

No. .....

RETURN OF A DEATH.

To the Clerk of the Town in which the Death occurred.

1. Date of Death,	June 4th 1899
2. Name,	Edward L. Hanlon
(Maiden Name),*	
(Name of Husband),*	
3. Sex, and whether single, Married, or Widowed,	Male Married
4. Color,†	White
5. Age,	50 Years, 9 Months, 4 Days.
6. Disease or Cause of Death, (Primary and Secondary),‡ Duration of Sickness, By whom certified,	
7. Residence,	Winthrop Mass
8. Occupation,	Artist
9. Place of Death,	36, Shirley Ave
10. Place of Birth,	Utica N.Y.
11. Name of Father,	James Hanlon
12. Name of Mother, (Maiden Name),	Mary
13. Birthplace of Father,	Ireland
14. Birthplace of Mother,	Ireland
15. Place of Interment,	Winthrop Cemetery
Signature of Undertaker or other person making the Return,	Lumer Fowler

DATED at Winthrop, on June 4 1899

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. May, 1893.—5,000.

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

Name and Age of Deceased,* Edward L. Hanlon. Age, 51-8-4

Date and Place of Death,† - died at Winthrop Mass June 4 1899,

Disease or Cause of Death, - of Myocarditis (Disease of heart
(Primary and Secondary.)‡
Duration of Sickness, - - muscle)

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, O. E. Johnson MD

Date of Certificate, June 5 1899.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion

Plate. Ed. December, 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

RETURN OF A DEATH.

To the Clerk of the City or Town in which the death occurred.

(FILL OUT WITH INK. ALL NAMES TO BE IN FULL.)

Name, Christine M. Eddy Sex, F Color, W

Date of Death, June 12 1899; Age, — Years, 2 Months, 17 Days.

Maiden Name, {If married, widowed or divorced.}

Husband's Name, David F. Eddy

Single, Married, Widowed or Divorced, S Occupation, —

*Residence, {If out of town, also state fully.} 10 [illegible]

Place of Birth, 10 [illegible]

*Place of Death, 10 [illegible]

Name of Father,

Birthplace of Father, [illegible]

Maiden name of Mother, Tina M. [illegible]

Birthplace of Mother, Salem [illegible]

Place of Interment, (Give name of Cemetery),

No.

OF THE DEATH

OF

189 .

189 .

1897 require that every householder in whose house a death occurs, the
eath of any of his kindred, or the person in charge of an institution in
date of such a death, give notice thereof to the board of health or to
red. (See section 6.)
otice of the death of any person under his charge to the board of health
wealth at which his vessel first arrives after such death. (See section 7.)
ents of sections 6 and 7, five dollars. (See section 8.)
his last illness shall forthwith after the death of said person, upon
th the required facts. (See section 10.)
section 11.)
reliminary to the interment of a human body shall obtain the physician's
turn it, together with the facts required by section 1, to the board of
death occurred.

PHYSICIAN'S CERTIFICATE.

Name and Age of Deceased,* Christina M. Leahy Age, 2 mos - 17 ds

Date and Place of Death,† - died at Winthrop. (108 Shirley St) June 10 " 1899,

Disease or Cause of Death, - of Meningitis
(Primary and Secondary.)‡

Duration of Sickness, - - twelve days

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, [illegible] M.D.

Date of Certificate, June 10 1899.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896. — 5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE OF THE CAUSE OF DEATH.

Boston, June 16th 189 9

Name and age of deceased: John P. Pfeiffer Age 64 yrs. — mos. — dys.

Date and place of death: June 16th 1899

Disease or cause of death: Organic Disease of Heart

*Duration of disease:** ...

I certify that the above is true, to the best of my knowledge and belief.

Name and residence of physician. Thomas F. Fecher, M. D.
Present Physician

*It is very desirable to be informed of the duration of the disease.

The office of the Board of Health will be open for the granting of permits for burial, as follows: — Saturdays, 9 A.M. till 2 P.M.; Sundays, 10 A.M. till 12 M. Holidays, from 10 A.M. till 12 M.; other days, from 9 A.M. till 5 P.M.

2
790
316
1950
39.60
16.50
23.10

UNDERTAKER'S RETURN.—Boston.

Date of death, June 16 1899 Name, George H. Kippen

Maiden name,* — Sex, Male

Married, single, or widow of Married d wife of —

Color, W Age, 64 years, — mos., — days. Residence, Port-Elida

Place of death (street and number), Natchaug Ave ward

Place of birth, England Occupation, Mariner

Name of father, William Maiden name of mother, Anna Loam

Birthplace of father, England Birthplace of mother, England

Place of interment,† Fruitwood Cemetery

* If a married woman or a widow. † Give the name of the burial ground.

Signature of Undertaker: Lemuel F Floyd

Undertaker

3 P.M.
3 Carriages

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death,	June 19 1899
2. Name,	Henry Otis Floyd
(Maiden Name),*	
(Name of Husband),*	
3. Sex, and whether single, Married, or Widowed,	Male Married
4. Color,†	White
5. Age,	62 Years, 7 Months, 19 Days.
6. Disease or Cause of Death, (Primary and Secondary),‡ Duration of Sickness,	
By whom certified,	
7. Residence,	Winthrop Mass
8. Occupation,	Contractor
9. Place of Death,	Winthrop (Shirley Pl)
10. Place of Birth,	Chelsea Mass
11. Name of Father,	David Floyd
12. Name of Mother, (Maiden Name).	Sally T. Tenney
13. Birthplace of Father,	Chelsea Mass
14. Birthplace of Mother,	Chelsea Mass
15. Place of Interment,	Winthrop Cemetery
Signature of Undertaker ~~or other person~~ making the Return,	Sumner Floyd

DATED at Winthrop, on June 19 1899

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

Be very particular to fill all Blanks.

Plate. Ed. Dec., 1896.—5,000

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Henry Otis Floyd ... *Age,* 62

Date and Place of Death,† - *died at* 16 Shirley St ... June 17 ... 1897,

Disease or Cause of Death, - *of* Interstinal Haemorrhage and Cerebral Hyperæmia.
(Primary and Secondary.)‡

Duration of Sickness, - - Eighteen days

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Edgar L Brown MD ... 16 Shirley St

Date of Certificate, ... June 17 ... 1897.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

Commonwealth of Massachusetts.

No. .....

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	June 28" 1899
2. Name, ...	Albert Wells
(Maiden Name),* .	
(Name of Husband),*	
3. Sex, and whether single,	Male
Married, or Widowed,	Single
4. Color,†	White
5. Age, ...	1 Years. 11 Months. 1 Days.
(Disease or Cause of Death, (Primary and Secondary),‡	
6. Duration of Sickness, .	
(By whom certified, .	Dr F A Hanks
7. Residence, ...	Winthrop Mass
8. Occupation, ...	
9. Place of Death, . . .	Off Revere Beach
10. Place of Birth, . . .	Winthrop
11. Name of Father, . .	John Wells
12. Name of Mother, . . (Maiden Name),	
13. Birthplace of Father, .	England
14. Birthplace of Mother, .	England
15. Place of Interment, .	Winthrop Cemetery
Signature of Undertaker or other person making the Return, ...	Sumner Floyd

DATED at Winthrop, on 29th June 1899

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896. — 5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Albert Nelle Age, 1 yr 11 mo - 1 d

Date and Place of Death,† - died at Winthrop (River St) June 28" 1899.

Disease or Cause of Death, - of accidental drowning
(*Primary and Secondary.*)‡

Duration of Sickness, - -

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, [illegible]

Date of Certificate, June 30 1899.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

No.

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	July 1st 1899
2. Name, ...	Edith M Smith
(Maiden Name),* .	
(Name of Husband),*	Hadoram Smith
3. Sex, and whether single,	Female (M)
Married, or Widowed,	Married
4. Color,†	White
5. Age, ...	36 Years, 6 Months, 19 Days.
(Disease or Cause of Death, (Primary and Secondary),‡	
6. Duration of Sickness, .	
(By whom certified, .	
7. Residence, ...	Winthrop Mass
8. Occupation, ...	
9. Place of Death, . . .	Marshall Street
10. Place of Birth, . . .	Nova Scotia
11. Name of Father, . .	Joseph M Kempton
12. Name of Mother, . . (Maiden Name),	Mary G. Hammond
13. Birthplace of Father, .	Nova Scotia
14. Birthplace of Mother, .	Nova Scotia
15. Place of Interment, .	Winthrop Cemetery
Signature of Undertaker ~~or other person~~ making the Return, ...	Single Man for Sumner Floyd

DATED at Winthrop, on July 1 1899

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Edna M. Smith Age, 36 yrs 6 mos 19 d.

Date and Place of Death,† - died at Winthrop (Marshall St.) July 1st 1899,

Disease or Cause of Death, - of Chronic Interstitial Nephritis
(Primary and Secondary.)‡

Duration of Sickness, - - Not known

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, H. A. Morrison 83 Princeton St.

Date of Certificate, June 30 1899.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed December, 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

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No. .....

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	July 2" 1899
2. Name, ...	Alexandrine Harrington
(Maiden Name),* .	McGinnis
(Name of Husband),*	Harrington
3. Sex, and whether single,	Female
Married, or Widowed,	Married
4. Color,†	White
5. Age, ...	39 Years, ~ Months, ~ Days.
(Disease or Cause of Death, (Primary and Secondary),‡	
6. Duration of Sickness, .	
(By whom certified, .	
7. Residence, ...	Winthrop Mass
8. Occupation, ...	
9. Place of Death, . . .	Trident Avenue O. Spray
10. Place of Birth, . . .	P E Ireland
11. Name of Father, . .	Alexander McGinnis
12. Name of Mother, . . (Maiden Name),	Eliza McGinnis
13. Birthplace of Father, .	P E. Ireland
14. Birthplace of Mother, .	P E. Ireland
15. Place of Interment, .	P E. Ireland
Signature of Undertaker ~~or other person~~ making the Return, ...	Sumner Floyd

DATED at Winthrop, on July 3" 1899

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896. — 5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

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SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

See date

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Alexandrina Harrington Age, 39.

Date and Place of Death,† - *died at* 22 Trident Ave Winthrop July 2 1899.

Disease or Cause of Death, - *of* Bronchitis Pneumonia, ~~Bronchitis~~
(Primary and Secondary.)‡

Duration of Sickness, - - Three weeks and one half.

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Edward F. Foye M. D.
Lewis Block. Winthrop Beach Mass.

Date of Certificate, July 3 1899.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

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PHYSICIAN'S CERTIFICATE OF THE CAUSE OF DEATH.

Boston, July 2nd 189 9

Name and age of deceased: Thomas Wilson Driscoll Age 1 yrs. 11 mos. 26 dys.

Date and place of death: July 2nd 1899 - 8 Saganore Ave Winthrop Highlands.

Disease or cause of death: Cerebral Hemorrhage following

injury of spine

Duration of disease: * Eleven hours

I certify that the above is true, to the best of my knowledge and belief.

Name and residence of physician. } 8 Saganore Ave. Winthrop Highlands, E. C. Drummond M.D.

* It is very desirable to be informed of the duration of the disease. When more than one cause of death is mentioned state the duration of each.

UNDERTAKER'S RETURN.—Boston.

Date of death, July 2 1899 Name, Thomas Wilson Francis

Maiden name,* Sex, M

~~Married~~, single, ~~or widow of~~ wife of

Color, W Age, 1 years, 11 mos. 26 days. Residence, 7 Saganore st Winthrop Mass

Place of death (street and number), 7 Saganore st Ward

Place of birth, E. Boston Occupation,

Name of father, Thomas Maiden name of mother, Catherine A Bagan

Birthplace of father, Boston Birthplace of mother, E. Boston

Place of interment,† "Holy Cross" Malden

* If a married woman or a widow. † Give the name of the burialground.

Thos J. Lane Undertaker.

Commonwealth of Massachusetts.

No.

RETURN OF A DEATH.

To the Clerk of the City or Town in which the death occurred.

(FILL OUT WITH INK. ALL NAMES TO BE IN FULL.)

Name, [illegible] Ford [illegible] Sex, F Color. W

Date of Death, Jan 17 189?; Age, ~ Years, ~ Months, 5 Days.

Maiden Name, {If married, widowed or divorced.}

Husband's Name, ~

Single, Married, Widowed or Divorced, ~ Occupation,

*Residence, {If out of town, also state fully.} ~

Place of Birth, ~

*Place of Death,

Name of Father,

Birthplace of Father,

Maiden name of Mother,

Birthplace of Mother,

Place of Interment, (Give name of Cemetery),

OF THE DEATH

OF

189 .

189 .

quire that every householder in whose house a death occurs, th
any of his kindred, or the person in charge of an institution in
such a death, give notice thereof to the board of health or to
ec section 6.)

the death of any person under his charge to the board of health
which his vessel first arrives after such death. (See section 7.)
sections 6 and 7, five dollars. (See section 8.)
illness shall forthwith after the death of said person, upon
quired facts. (See section 10.)
11.)

to the interment of a human body shall obtain the physician's
ogether with the facts required by section 1, to the board of
curred.

PHYSICIAN'S CERTIFICATE OF THE CAUSE OF DEATH.

Boston, July 17th 189 9

Name and age of deceased: Unknown Age yrs. mos. 5 12 dys.

Date and place of death: Found July 17th 1899 Grover's Cliff.

Disease or cause of death: Unknown — — Male —

Too much decomposed to furnish any proof of cause

Duration of disease: *

I certify that the above is true, to the best of my knowledge and belief.

Name and residence of physician. Francis A. Harris M.D.
Med. Examiner

* It is very desirable to be informed of the duration of the disease. When more than one cause of death is mentioned state the duration of each.

The office of the Board of Health will be open for the granting of permits for burial, as follows: — Saturdays, 9 A.M. till 1 P.M., except during the months of June, July, August and September, when the office will be closed on Saturdays at 12 M.; Sundays, 10 A.M. till 12 M.; Holidays, from 10 A.M. till 12 M.; other days, from 9 A.M. till 5 P.M.

RETURN OF A DEATH.

To the Clerk of the City or Town in which the death occurred.

(FILL OUT WITH INK. ALL NAMES TO BE IN FULL.)

Name, Susan L. Glenn Sex, F Color,

Date of Death, July 24" 1897; Age, — Years, 5 Months, 17 Days.

Maiden Name, {If married, widowed or divorced.} —

Husband's Name, —

Single, Married, Widowed or Divorced, S Occupation,

*Residence, {If out of town, also state fully.} 14 Main

Place of Birth, " "

*Place of Death, " "

Name of Father, Patrick Glenn

Birthplace of Father, Susan L Glenn

Maiden name of Mother, McKay

Birthplace of Mother, Ireland

Place of Interment, (Give name of Cemetery), [illegible] Cemetery

Dated at Whitinsville

on July 25 1897

Signature and place of business of Undertaker. Sumner Floyd Whitinsville Mass

No.

ETURN OF THE DEATH

OF

189 .

189 .

Acts of 1897 require that every householder in whose
e of the death of any of his kindred, or the person in c
after the date of such a death, give notice thereof to t
eath occurred. (See section 6.)
ll give notice of the death of any person under his char
e Commonwealth at which his vessel first arrives after such
requirements of sections 6 and 7, five dollars. (See se
on during his last illness shall forthwith after the dea
etting forth the required facts. (See section 10.)
ars. (See section 11.)
eal rites preliminary to the interment of a human body sh
10, and return it, together with the facts required by se
which the death occurred.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Susan S. Sheerin Age, 5 ons 17 ds

Date and Place of Death,† - died at Winthrop Main Street July 24 1899.

Disease or Cause of Death, - of Cholera Infantum
(Primary and Secondary.)‡

Duration of Sickness, - -

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Horace J Lamb M.D.

Date of Certificate, July 25 1899.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896.—5,000.

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE OF THE CAUSE OF DEATH.

Boston, July 25th, 1899

Name and age of deceased: Sarah A. Colligan Age 27 yrs. × mos. × dys.

Date and place of death: July 25, 1899 + 30 Cottage Ave.

Disease or cause of death: Phthisis Pulmonalis

*Duration of disease:** One year

I certify that the above is true, to the best of my knowledge and belief.

Name and residence of physician. W. T. Cross M. D.
424 Broadway
S Boston

* It is very desirable to be informed of the duration of the disease.

The office of the Board of Health will be open for the granting of permits for burial, as follows: — Saturdays, 9 A.M. till 2 P.M., except during the months of June, July, August and September, when the office will be closed on Saturdays at 12 M.; Sundays, 10 A.M. till 12 M.; Holidays, from 10 A.M.

UNDERTAKER'S RETURN.—Boston.

Date of death, July 25, 1899 Name, Sarah A. Coleman

Maiden name,* Sarah Terry Sex, F.

Married, ~~single, or widow of~~ wife of Clement H.

Color, White Age, 27 years, X mos., X days. Residence, Winthrop Mass

Place of death (street and number), #30 Cottage Ave ward

Place of birth, Boston Occupation, Housewife

Name of father, Martin Terry Maiden name of mother, Mary O'Neill

Birthplace of father, Ireland Birthplace of mother, Ireland

Place of interment,† Malden, K. C.

*If a married woman or a widow. †Give the name of the burial ground.

John H. Lavery & Son Undertaker.

RETURN OF A DEATH.

To the Clerk of the City or Town in which the death occurred.

(FILL OUT WITH INK. ALL NAMES TO BE IN FULL.)

Name, Mary O'Sullivan Collamore Sex, Fe Color, W

Date of Death, July 30 1899; Age, 14 Years, 4 Months, 10 Days.

Maiden Name, {If married, widowed or divorced.}

Husband's Name,

Single, ~~Married, Widowed or Divorced,~~ S Occupation,

*Residence, {If out of town, also state fully.} Winthrop Mass

Place of Birth, Boston Mass

*Place of Death, 20 Pemberton St. "Col" Hse

Name of Father, Robert G. S. Collamore

Birthplace of Father, Charlestown Mass

Maiden name of Mother, Mary Nicholson

Birthplace of Mother, Cape Breton

Place of Interment, (Give name of Cemetery),

Dated at Winthrop

on July 30th 1899

Signature and place of business of Undertaker.

No.

TURN OF THE DEATH

OF

189 .

189 .

ets of 1897 require that every householder in whose house a d
f the death of any of his kindred, or the person in charge of
ter the date of such a death, give notice thereof to the board
h occurred. (See section 6.)
give notice of the death of any person under his charge to the
ommonwealth at which his vessel first arrives after such death.
equirements of sections 6 and 7, five dollars. (See section 8.)
during his last illness shall forthwith after the death of sai
ing forth the required facts. (See section 10.)
. (See section 11.)
rites preliminary to the interment of a human body shall obtain
and return it, together with the facts required by section 1,
ich the death oc d.

PHYSICIAN'S CERTIFICATE.

Name and Age of Deceased,† Mary H. Collamore Age, 14 Y. 4 M. 10 D.

Place and Date of Death,‡ died at 20 Tenbelly Street July 30 1899

Disease or Cause of Death,§ Epilepsy

Duration of sickness, Ten years.

I certify that the above is true to the best of my knowledge and belief.

Signature and Residence of Certifying Physician. Wm J. Porter M. D.
Winthrop.

Date of Certificate, July 30th 1899.

* Give also street and number, if any.
† Or sex of infant not named. If still-born, so state. ‡ If child died immediately after birth, so state.
§ If a Soldier or Sailor in the War of the Rebellion, give both Primary and Secondary Cause.

RE

at

Date,

Filed,

The provisions of chapter 444 of the
oldest person next of kin present at the time
which a death occurs, shall, within five days
the clerk of the city or town in which the d

The commanding officer of a vessel sh
or to the clerk of the city or town within th

Penalty for neglect to comply with th

A physician who has attended a pers
request, furnish for registration a certificate

Penalty for refusal or neglect, ten doll

Any person having charge of the funer
certificate made in accordance with section
health or to the clerk of the city or town in

RETURN OF A DEATH.

To the Clerk of the City or Town in which the death occurred.

(FILL OUT WITH INK. ALL NAMES TO BE IN FULL.)

Name, Martha Cox Sex, F Color, White

Date of Death, August 2" 1899; Age, 76 Years, 4 Months, 22 Days.

Maiden Name, {If married, widowed or divorced.} Martha Lightbody

Husband's Name, Archibald T. Cox

~~Single, Married~~, Widowed ~~or Divorced~~, Occupation,

*Residence, {If out of town, also state fully.} 229 Bennington Street — E. Boston

Place of Birth, Nova Scotia

*Place of Death, No 8 Atlantic Street Winthrop

Name of Father, James Lightbody

Birthplace of Father, Nova Scotia

Maiden name of Mother, Mc Quin

Birthplace of Mother, Scotland

Place of Interment, (Give name of Cemetery), East Boston Cemetery (Bennington St)

Dated at Winthrop

on August 2" 1899

Signature and place of business of Undertaker. Sumner Floyd Winthrop Mass

No.

ETURN OF THE DEATH

OF

189 .

189 .

Acts of 1897 require that every householder in whose house
of the death of any of his kindred, or the person in charge
after the date of such a death, give notice thereof to the bo
eath occurred. (See section 6.)
ll give notice of the death of any person under his charge to
Commonwealth at which his vessel first arrives after such deat
requirements of sections 6 and 7, five dollars. (See section
on during his last illness shall forthwith after the death of
etting forth the required facts. (See section 10.)
ars. (See section 11.)
eal rites preliminary to the interment of a human body shall ob
10, and return it, together with the facts required by section
which the death occurred.

PHYSICIAN'S CERTIFICATE.

Name and Age of Deceased,† Martha Cof Age, 76 Y. 4 M. 22 D.

Place and Date of Death,‡ died at Winthrop Aug 2" 1899

Disease or Cause of Death,§ Old Age

Duration of sickness, Six weeks

I certify that the above is true to the best of my knowledge and belief.

Signature and Residence of Certifying Physician. Horace J Soule M. D.
Winthrop Mass

Date of Certificate, Aug 4th 1899.

Give also street and number, if any.
† Or sex of infant not named. If still-born, so state. ‡ If child died immediately after birth, so state.
§ If a Soldier or Sailor in the War of the Rebellion, give both Primary and Secondary Cause.

The provisions of chapter 444 of
oldest person next of kin present at the
which a death occurs, shall, within five
the clerk of the city or town in which t

The commanding officer of a vess
or to the clerk of the city or town withi

Penalty for neglect to comply wit

A physician who has attended a
request, furnish for registration a certifi

Penalty for refusal or neglect, te

Any person having charge of the
certificate made in accordance with sec
health or to the clerk of the city or tow

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Hazel A. Smith Age, 3 yr. 4 mo. & 3 days.

Date and Place of Death,† - died at 8 Charles St, Winthrop, Aug. 3d 1899,

Disease or Cause of Death, - of Peritonitis Secondary to Entero-Colitis
(*Primary and Secondary.*)‡

Duration of Sickness, - - Five days

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Wm J. Porter, M.D. Winthrop Mass.

Date of Certificate, Aug. 3d 1899.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

UNDERTAKER'S RETURN.—Boston.

Date of death, Aug 3 1899 Name, Hazel W Smith

Maiden name,* Smith Sex, Female

~~Married~~, single, ~~or widow~~ of ——— wife of ———

Color, White Age, 3 years, 4 mos., 3 days. Residence, Alston Mass

Place of death (street and number), 8 Charles St Winthrop ward ———

Place of birth, Allston Mass Occupation, ———

Name of father, Wm C Smith Maiden name of mother, Cora E Thayer

Birthplace of father, Brighton mass Birthplace of mother, Quincy Mass

Place of interment,† Evergreen Cem Brighton Mass.

*If a married woman or a widow. †Give the name of the burial ground.

John R Roider Undertaker.

PHYSICIAN'S CERTIFICATE OF THE CAUSE OF DEATH.

Winthrop, Aug 4th 189 9

Name and age of deceased: Alan E. McLauch Age 67 yrs. mos. dys.

Date and place of death: Aug 4th 47 Pleasant St

Disease or cause of death: Cancer of stomach

Duration of disease: *

I certify that the above is true, to the best of my knowledge and belief.

Name and residence of physician. John A. Hickey M.D.
144 Saratoga St. E. B.

* It is very desirable to be informed of the duration of the disease. When more than one cause of death is mentioned state the duration of each.

The office of the Board of Health will be open for the granting of permits for burial, as follows: — Saturdays, 9 A.M. till 1 P. M., except during the months of June, July, August and September, when the office will be closed on Saturdays at 12 M.; Sundays, 10 A.M. till 12 M.; Holidays, from 10 A.M. till 12 M.; other days, from 9 A.M. till 5 P.M.

UNDERTAKER'S RETURN. ~~Boston.~~ Winthrop

Date of death, Aug 4th 1899 Name, Mary E. McCloud

Maiden name,* McGrath Sex, F

~~Married, single, or~~ widow of John wife of

Color, W Age, 67 years, mos., days. Residence, 47 Pleasant st

Place of death (street and number), 47 Pleasant st Ward

Place of birth, Winthrop Mass Occupation, housewife

Name of father, Henry Maiden name of mother Ann James

Birthplace of father, Ireland Birthplace of mother, Ireland

Place of interment,† Dorchester ~~St~~ Catholic Cemetery (old)

*If a married woman or a widow. † Give the name of the burial-ground.

T. H. Carter Undertaker.

RETURN OF A DEATH.

To the Clerk of the City or Town in which the death occurred.

(FILL OUT WITH INK. ALL NAMES TO BE IN FULL.)

Name, ~~Elizabeth~~ Eunice E. Sweetland Sex, F Color, W

Date of Death, August 11 1899; Age, 74 Years, 3 Months, 19 Days.

Maiden Name, {If married, widowed or divorced.} Widowed

Husband's Name, Robert L.

Single, Married, Widowed or Divorced, W. Occupation, ~

*Residence, {If out of town, also state fully.} Winthrop Mass

Place of Birth, Monticello Me

*Place of Death, Not Known Dead

Name of Father, Eben Whitten

Birthplace of Father, Monticello Me

Maiden name of Mother, Eunice Turner

Birthplace of Mother, Monticello Me

Place of Interment, (Give name of Cemetery), Winthrop Cemetery

Dated at Winthrop

on August 11th 1899

Signature and place of business of Undertaker. { Burrill & Flint
Winthrop Mass

No.

ETURN OF THE DEATH

OF

189 .

189 .

Acts of 1897 require that every householder in whose house a
of the death of any of his kindred, or the person in charge of
after the date of such a death, give notice thereof to the board
ath occurred. (See section 6.)

ll give notice of the death of any person under his charge to the
Commonwealth at which his vessel first arrives after such death.
requirements of sections 6 and 7, five dollars. (See section 8.)
n during his last illness shall forthwith after the death of sa
etting forth the required facts. (See section 10.)
rs. (See section 11.)
al rites preliminary to the interment of a human body shall obtain
0, and return it, together with the facts required by section 1,
which the death occurred.

Donnay

PHYSICIAN'S CERTIFICATE.

Name and Age of Deceased,† Eunice E Sweetland Age, 74 Y. 3 M. 19 D.

Place and Date of Death,‡ died at Winthrop No 1 Fremont St Aug 11 1899

Disease or Cause of Death,§ Bright's Disease of the Kidneys

Duration of sickness, Two or more years

I certify that the above is true to the best of my knowledge and belief.

Signature and Residence of Certifying Physician. A B Duncan M. D.
56 Winthrop St

Date of Certificate, Aug 12th 1899.

Give also street and number, if any.
† Or sex of infant not named. If still-born, so state. ‡ If child died immediately after birth, so state.
§ If a Soldier or Sailor in the War of the Rebellion, give both Primary and Secondary Cause.

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The provisions of chapter 444 of t
oldest person next of kin present at the ti
which a death occurs, shall, within five da
the clerk of the city or town in which the

The commanding officer of a vessel
or to the clerk of the city or town within

Penalty for neglect to comply with

A physician who has attended a pe
request, furnish for registration a certificat

Penalty for refusal or neglect, ten d

Any person having charge of the fun
certificate made in accordance with section
health or to the clerk of the city or town i

PHYSICIAN'S CERTIFICATE OF THE CAUSE OF DEATH.

Boston, .. *189*

Name and age of deceased: Bridget Ivers Age yrs. 1 mos. 1 dys.

Date and place of death: August 10th 1891 Putnam St.

Disease or cause of death: Cerebro spinitis

*Duration of disease:** One week

I certify that the above is true, to the best of my knowledge and belief.

Name and residence of physician. } D. H. Metcalf 822 Winthrop St. Winthrop Mass. *M.D.*

* It is very desirable to be informed of the duration of the disease. When more than one cause of death is mentioned state the duration of each.

The office of the Board of Health will be open for the granting of permits for burial, as follows: — Saturdays, 9 A.M. till 1 P. M., except during the months of June, July, August and September, when the office will be closed on Saturdays at 12 M.; Sundays, 10 A.M. till 12 M.; Holidays, from 10 A.M. till 12 M.; other days, from 9 A.M till 5 P.M.

UNDERTAKER'S RETURN. Boston.

Date of death, Aug. 16th 189 7 Name, Mary L. Mayhew

Maiden name,* Sex, Female

Married, single, or widow of wife of

Color, White Age, — years, — mos., 12 days. Residence, Putnam St. Dorchester

Place of death (street and number), Putnam St. Dorchester Ward

Place of birth, Boston Occupation, (illegible)

Name of father, Lawrence A. Lee Maiden name of mother, Mary E. Williams

Birthplace of father, England Birthplace of mother, Connecticut

Place of interment,† Dorchester

*If a married woman or a widow. † Give the name of the burial-ground.

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	August 17 1899
2. Name, ...	Grace Wade James
(Maiden Name),* .	
(Name of Husband),*	
3. Sex, and whether single,	Female
Married, or Widowed,	Married
4. Color,†	White
5. Age, ...	41 Years, 4 Months, 15 Days.
(Disease or Cause of Death, (Primary and Secondary),‡	
6. Duration of Sickness, .	
(By whom certified, .	
7. Residence, ...	[illegible] Mass
8. Occupation, ...	[illegible]
9. Place of Death, . . .	[illegible] Mass
10. Place of Birth, . . .	Pittsfield Mass
11. Name of Father, . .	Wade [illegible]
12. Name of Mother, . . (Maiden Name),	Cat[illegible]e C [illegible]
13. Birthplace of Father. .	[illegible]
14. Birthplace of Mother. .	[illegible]
15. Place of Interment, .	Forest Hills Cemetery
Signature of Undertaker ~~or other person~~ making the Return, ...	[illegible]

DATED at Winthrop, on Aug 18" 1899

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall carry in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Charles Walter Jones Age, 41 yrs -

Date and Place of Death,† - *died at* 18 Logue St Died August 17th 1899.

Disease or Cause of Death, - *of* Epithelioma of Tongue.
(Primary and Secondary.)‡

Duration of Sickness, - - 3 yrs.

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, B. H. Metcalf M.D. 52 Winthrop St Winthrop Mass

Date of Certificate, Aug 18th 1899.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896. — 5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

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No.

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . . September 8" 1898
2. Name, ... Donald D. Duncan
   (Maiden Name),* .
   (Name of Husband),* .
3. Sex, and whether single, Male
   Married, or Widowed,
4. Color,† . . . . . W
5. Age, ... 1 Year, — Months, 15 Days.
6. Disease or Cause of Death, (Primary and Secondary),‡ Dr
   Duration of Sickness, .
   By whom certified, .
7. Residence, ... Fresh Pond
8. Occupation, ...
9. Place of Death, . . . 31 Wash'n
10. Place of Birth, . . . Fresh Pond
11. Name of Father, . . .
12. Name of Mother, . . .
    (Maiden Name),
13. Birthplace of Father, . Fresh Pond
14. Birthplace of Mother, .
15. Place of Interment, .

Signature of Undertaker ~~or other person making~~ the Return, ... Sumner Floyd

Dated at Winthrop, on Sept 9 1898

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until h has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such c or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned a recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending phys cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health o physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificat required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall with countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so giv shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as th clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceed ing fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Donald W. Donovan *Age,* 1y 15d

Date and Place of Death,† - *died at* Smiths *Sept* 8 *189*9,

Disease or Cause of Death, - *of* Marasmus

(*Primary and Secondary.*)‡

Duration of Sickness, - -

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, C. E. Johnson MD.

Date of Certificate, Sept 8 *189*9.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December. 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

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PHYSICIAN'S CERTIFICATE OF THE CAUSE OF DEATH.

Winthrop — Boston, Sept. 8th 1899

Name and age of deceased: Edward F. Collins Age 47 yrs. — mos. — dys.

Date and place of death: Sept. 8th 1899. Cross St, near Almont St.

Disease or cause of death: Bright's Disease of the Kidneys

Duration of disease: * Probably some 4 or 5 years

I certify that the above is true, to the best of my knowledge and belief.

Name and residence of physician. } Albert B. Dorman M.D.
56 Winthrop St, Winthrop, Mass.

* It is very desirable to be informed of the duration of the disease. When more than one cause of death is mentioned state the duration of each.

The office of the Board of Health will be open for the granting of permits for burial, as follows: — Saturdays, 9 A.M. till 1 P.M., except during the months of June, July, August and September, when the office will be closed on Saturdays at 12 M.; Sundays, 10 A.M. till 12 M.; Holidays, from 10 A.M. till 12 M.; other days, from 9 A.M. till 5 P.M.

UNDERTAKER'S RETURN.—Boston.

Date of death, Sept 8th 1899 Name, Edward F. Collins

Maiden name,* — Sex, Male

~~Married~~, single, ~~or widow~~ of ~~wife of~~

Color, Wh Age, 47 years, — mos., — days. Residence, Cor Cross & Almont Sts

Place of death (street and number), Cor Cross & Almont Sts Ward

Place of birth, Fair Haven Mass Occupation, Lawyer

Name of father, Joseph W Maiden name of mother, Sybil Kennison

Birthplace of father, Eastham Mass Birthplace of mother, Unknown

Place of interment,† Holy Cross Malden

* If a married woman or a widow. † Give the name of the burial-ground.

M. J. Kelly

Undertaker.

PHYSICIAN'S CERTIFICATE OF THE CAUSE OF DEATH.

Boston, Sept 189 9.

Name and age of deceased: David W. Blanchard Age 45 yrs. mos. dys.

Date and place of death: Sept 9 Winthrop Beach

Disease or cause of death: General paresis (Slight Paralysis)

Duration of disease: * Probably some years

I certify that the above is true, to the best of my knowledge and belief.

Name and residence of physician. A. B. Dorman M.D.

56 Winthrop St. Winthrop, Mass

* It is very desirable to be informed of the duration of the disease. When more than one cause of death is mentioned state the duration of each.

The office of the Board of Health will be open for the granting of permits for burial, as follows: — Saturdays, 9 A.M. till 1 P.M., except during the months of June, July, August and September, when the office will be closed on Saturdays at 12 M.; Sundays, 10 A.M. till 12 M.; Holidays, from 10 A.M. till 12 M.; other days, from 9 A.M. till 5 P.M.

UNDERTAKER'S RETURN.—Boston.

Date of death, Sept 9 1899 Name, David W Blanchard

Maiden name,* Sex, M

Married, ~~single, or widow~~ of wife of

Color, W Age, 45 years, mos., days. Residence, 509 Columbus Ave

Place of death (street and number), Young's Hotel Ward

Place of birth, Boston Occupation, Clerk

Name of father, David H. Maiden name of mother, Mary Haley

Birthplace of father, N.H. Birthplace of mother, New Brunswick

Place of interment,† Forest Hills

* If a married woman or a widow. † Give the name of the burialground.

D. Tinkham *Undertaker.*

PHYSICIAN'S CERTIFICATE OF THE CAUSE OF DEATH.

Boston, Sept 13 1897

Name and age of deceased: Alice Duncan Age 8 yrs. 8 mos. 8 dys. 7

Date and place of death: September 13th at 9 King Ave. Winthrop Mass.

Disease or cause of death: Marasmus

Duration of disease:* Seven months.

I certify that the above is true, to the best of my knowledge and belief.

Name and residence of physician. O. Johnson M. D

*It is very desirable to be informed of the duration of the disease.

The office of the Board of Health will be open for the granting of permits for burial, as follows: — Saturdays, 9 A.M. till 2 P.M., except during the months of June, July, August and September, when the office will be closed on Saturdays at 12 M.; Sundays, 10 A.M. till 12 M.; Holidays, from 10 A.M. till 12 M.; other days, from 9 A.M. till 5 P.M.

UNDERTAKER'S RETURN.—~~Boston.~~

Date of death, Sept. 13 1899. Name, Alice Duncan.

Maiden name,* ..... Sex, F.

~~Married~~, single, or ~~widow of~~ ..... wife of ..... 31 St. Germain St.

Color, W. Age, — years, 8 mos., 9 days. Residence, Boston

Place of death (street and number), 9 Vine Ave. Winthrop ward

Place of birth, Boston (Occupation, Factory Clerk.

Name of father, Andrew S. Maiden name of mother, Sadie E. Dugan

Birthplace of father, East Boston Birthplace of mother, Dorchester Mass.

Place of interment,† M. C. Hope Cemt.

*If a married woman or a widow. †Give the name of the burial ground.

E. G. Brown Undertaker.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Luke Owens *Age,* 36

Date and Place of Death,† - *died at* Berlin Harbor Sept. 14th 1899,

Disease or Cause of Death, - *of* Accidental drowning
(Primary and Secondary.)‡

Duration of Sickness, - -

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Francis A Harris Med. Examr

Date of Certificate, Sept. 25th 1899.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December. 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

UNDERTAKER'S RETURN.—~~Boston.~~

Date of death, September 14 1899 Name, Luke Owens

Maiden name,* ~ Sex, Male

~~Married~~, single, ~~or widow of~~ wife of ~

Color, W Age, 36 years, mos., days. Residence, Boston

Place of death (~~street and number~~), Gun Bar, Boston Harbor ward ~

Place of birth, Occupation,

Name of father, Maiden name of mother,

Birthplace of father, Birthplace of mother,

Place of interment,† Williamantic Conn

*If a married woman or a widow. †Give the name of the burial ground.

Signature of Undertaker: Sumner Floyd

Whitman Mass

RETURN OF A DEATH.

To the Clerk of the City or Town in which Death occurred.

1. Date of Death, . . .	Octo. 6" 18[illegible]
2. Name, ...	Elizabeth Jane Putnam
(Maiden Name),* .	~
(Name of Husband),*	~
3. Sex, and whether single,	Female
Married, or Widowed,	~
4. Color,†	White
5. Age, ...	55 Years, 1 Months, 23 Days
(Disease or Cause of Death, (Primary and Secondary),‡	
6. Duration of Sickness, .	
(By whom certified, .	Dr Lake
7. Residence, ...	Hinsdale Mass
8. Occupation, ...	~
9. Place of Death, . . .	Putnam Block
10. Place of Birth, . . .	Bradford P E I
11. Name of Father, . .	John Putnam
12. Name of Mother, . . (Maiden Name),	Jane Putnam
13. Birthplace of Father, .	England
14. Birthplace of Mother, .	P E I
15. Place of Interment, .	Hinsdale Mass
Signature of Undertaker or other person making the Return, ...	Dennis Fox

DATED at Hinsdale, on Oct 6" 18[illegible]

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896.—5,000

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Elizabeth Jane Putnam Age, 55-1-23

Date and Place of Death,† - *died at* Winthrop (Putnam Street) Oct 6 1899,

Disease or Cause of Death, - *of* Multiple Sclerosis
(Primary and Secondary.)‡

Duration of Sickness, - - Nine months.

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Horace J. Soule M.D.

Date of Certificate, Oct 7th 1899.

* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

UNDERTAKER'S RETURN.—Boston.

Date of death, Oct 6 1899 Name, Edward Cyr

Maiden name,* ——— Sex, M

Married, single, or widow of ——— wife of ———

Color, W. Age, 73 years, 5 mos., 3 days. Residence, 30 Reed St

Place of death (street and number), 30 Reed St Winthrop Ward

Place of birth, Canada Occupation, Laborer

Name of father, David Maiden name of mother, Louis Gerald

Birthplace of father, Canada Birthplace of mother, Canada

Place of interment,† "Holy Cross" Malden

* If a married woman or a widow. † Give the name of the burial-ground.

Thos. J. Lane *Undertaker.*

PHYSICIAN'S CERTIFICATE OF THE CAUSE OF DEATH.

Boston, Oct 1897

Name and age of deceased: Edward Cyr Age 73 yrs. 3 mos. 3 dys.

Date and place of death: Oct 6. 1897 31 Read St Austin P

Disease or cause of death: Carcinoma of Stomach

Duration of disease: * One (1) year

I certify that the above is true, to the best of my knowledge and belief.

Name and residence of physician. Henry Howard 29 Read St M.D.

* It is very desirable to be informed of the duration of the disease. When more than one cause of death is mentioned state the duration of each.

The office of the Board of Health will be open for the granting of permits for burial, as follows: — Saturdays, 9 A.M. till 1 P.M., except during the months of June, July, August and September, when the office will be closed on Saturdays at 12 M.; Sundays, 10 A.M. till 12 M.; Holidays, from 10 A.M. till 12 M.; other days, from 9 A.M. till 5 P.M.

PHYSICIAN'S CERTIFICATE OF THE CAUSE OF DEATH.

Boston, Oct 5 189 7

Name and age of deceased: Edward Cyr Age 73 yrs. 3 mos. 3 dys.

Date and place of death: Oct 6. 1897 38 Read St Roxbury

Disease or cause of death: Carcinoma of Stomach

Duration of disease: * One (1) year

I certify that the above is true, to the best of my knowledge and belief.

Name and residence of physician. Henry Howard 20 Dearborn M.D.

* It is very desirable to be informed of the duration of the disease. When more than one cause of death is mentioned state the duration of each.

The office of the Board of Health will be open for the granting of permits for burial, as follows: — Saturdays, 9 A.M. till 1 P.M., except during the months of June, July, August and September, when the office will be closed on Saturdays at 12 M.; Sundays, 10 A.M. till 12 M.; Holidays, from 10 A.M. till 12 M.; other days, from 9 A.M. till 5 P.M.

UNDERTAKER'S RETURN.—Boston.

Date of death, Oct 6 1899 Name, Edward Cyr

Maiden name,* ——— Sex, M.

Married, single, or widow of ——— wife of ———

Color, W. Age, 73 years, 5 mos., 3 days. Residence, 30 Reed St

Place of death (street and number), 30 Reade St Winthrop Ward

Place of birth, Canada Occupation, Laborer

Name of father, David Maiden name of mother, Louis Gerald

Birthplace of father, Canada Birthplace of mother, Canada

Place of interment,† "Holy Cross" Malden

* If a married woman or a widow. † Give the name of the burial-ground.

Thos. J. Lane *Undertaker.*

RETURN OF A DEATH.

To the Clerk of the City or Town in which the Death occurred.

1. Date of Death, . . .	Octobe 9" 1899
2. Name, ...	John L Hunter
(Maiden Name),* .	
(Name of Husband).*	
3. Sex, and whether single,	Male
Married, or Widowed,	Widower
4. Color,†	White
5. Age, ...	31 Years, 11 Months, 9 Days.
(Disease or Cause of Death, (Primary and Secondary),‡	
6. Duration of Sickness, .	
(By whom certified, .	Smith & Shaw M D
7. Residence, ...	2 Brighton
8. Occupation, ...	Engineer
9. Place of Death, . . .	Brighton
10. Place of Birth, . . .	Boston
11. Name of Father, . .	John Hunter
12. Name of Mother, . . (Maiden Name),	Victoria Hunter
13. Birthplace of Father, .	England
14. Birthplace of Mother, .	England
15. Place of Interment, .	Forest Hills
Signature of Undertaker or ~~other person~~ making the Return, ...	Undertaker

DATED at Oct 9, on 1899 18 .

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. Dec., 1896. — 5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** John J. Hunter Age, 31 yr 11 mos 9

Date and Place of Death,† - died at Winthrop October 9th 1899 1899

Disease or Cause of Death, - of Pyemia resulting from Septic Thrombosis originating
(Primary and Secondary.)‡ in left internal Saphenous vein, Secondary Erysipelas
followed by R. Lobar Pneumonia and a general
Duration of Sickness, - - Typhoid condition. Entire illness his 9 months.
Pyemia about nine days.

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Frank A. Gillan.
15 Princeton St East Boston

Date of Certificate, Oct 10, 1899.

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* Or Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896. — 5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

FRANK H. TILTON, M. D.

15 Princeton Street.

CONNECTED BY TELEPHONE.

OFFICE HOURS:
1 to 3 and 7 to 8 P. M.
Sundays, 12.30 to 1.30 P. M.

RETURN OF A DEATH.

To the Clerk of the Town in which the Death occurred.

1. Date of Death,	Oct 11th 1899
2. Name,	Mary P. Smith
(Maiden Name),*	Mary P. Dodge
(Name of Husband),*	J. M. Smith
3. Sex, and whether single,	Female
Married, or Widowed,	Married
4. Color,†	White
5. Age,	71 Years, 2 Months, 18 Days.
6. Disease or Cause of Death, (Primary and Secondary),‡	General Paresis Cerebral hemorrhage
Duration of Sickness,	9 months
By whom certified,	B. H. Mattocks M. D.
7. Residence,	Winthrop
8. Occupation,	
9. Place of Death,	Winthrop
10. Place of Birth,	Edgecomb Me.
11. Name of Father,	Ed Lodge
12. Name of Mother, (Maiden Name),	Mary Lodge Mary Pinkham
13. Birthplace of Father,	Maine
14. Birthplace of Mother,	
15. Place of Interment,	Winthrop Cemetery
Signature of Undertaker ~~or other person~~ making the Return,	Sumner Floyd

DATED at Winthrop, on Oct 12 1899

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. May, 1895.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*Name and Age of Deceased,** Mary P. Stuart Age, 74-2-6

Date and Place of Death,† - *died at* 33 Pleasant St. Winthrop Mass Oct 11th 1894,

Disease or Cause of Death, - *of* General Paresis, Carcinoma Abdominalis

(Primary and Secondary)‡

Duration of Sickness, - - 9 months

I certify that the above is true, to the best of my knowledge and belief.

Signature and Residence of Certifying Physician, Benjamin Metcalf M.D.

Date of Certificate, Oct. 14 1894.

* Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

RETURN OF A DEATH.

To the Clerk of the Town in which the Death occurred.

1. Date of Death, . . .	Oct 14th
2. Name, ...	Jesse M Stroud
(Maiden Name),* .	~
(Name of Husband),*	~
3. Sex, and whether single,	Male
Married, or Widowed,	Married
4. Color,†	White
5. Age, ...	75 Years, 4 Months, 1 Days.
6. Disease or Cause of Death, (Primary and Secondary), ‡	
Duration of Sickness, .	
By whom certified, .	
7. Residence, ...	Winchester
8. Occupation, ...	~
9. Place of Death, . . .	Winchester
10. Place of Birth, . . .	
11. Name of Father, . .	
12. Name of Mother, . . (Maiden Name),	
13. Birthplace of Father, .	
14. Birthplace of Mother, .	
15. Place of Interment, .	Winchester Cemetery
Signature of Undertaker ~~or other person~~ making the Return, ...	Sumner Floyd

DATED at Winchester, on Oct 15th 1899

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. May, 1893.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*me and Age of Deceased,** Jessie [illegible] Age, 7 5-4-

te and Place of Death,† died at 33 Thurston St ct 14th. [illegible] 189 ,

sease or Cause of Death, (*Primary and Secondary.*)‡ of Cerebral Hemorrhage

uration of Sickness, 2 hrs

I certify that the above is true, to the best of my knowledge and belief.

nature and Residence of Certifying Physician, [illegible] M.D.

Date of Certificate, Oct 14 189 .

r Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE OF THE CAUSE OF DEATH.

Boston, Oct. 16' 1899.

Name and age of deceased: Elizabeth A. Sarnberg Age 44 yrs. mos. dys.

Date and place of death: Oct. 16' 99 — # 10 Summit Ave. Winthrop

Disease or cause of death: Carcinoma

Duration of disease: * 1 Year

I certify that the above is true, to the best of my knowledge and belief.

Name and residence of physician. W. Burt Eutichael East Boston M.D.

* It is very desirable to be informed of the duration of the disease. When more than one cause of death is mentioned state the duration of each.

The office of the Board of Health will be open for the granting of permits for burial, as follows: — Saturdays, 9 A.M. till 1 P. M., except during the months of June, July, August and September, when the office will be closed on Saturdays at 12 M.; Sundays, 10 A.M. till 12 M.; Holidays, from 10 A.M. till 12 M.; other days, from 9 A.M. till 5 P.M.

UNDERTAKER'S RETURN. — ~~Boston.~~

Date of death, Dec. 16 1899. Name, Elizabeth A. Grumberg.

Maiden name,* Critchley Sex, F.

Married, ~~single, or widow of~~ wife of Meyer

Color, W. Age, 44 years, mos., days. Residence, Winthrop

Place of death (street and number), 10 Summit Ave. Ward

Place of birth, Lynn, Mass. Occupation, ~~Domestic~~

Name of father, George Maiden name of mother, Mary Ann.

Birthplace of father, England Birthplace of mother, N. S.

Place of interment,† Winthrop Cem.

*If a married woman or a widow. †Give the name of the burial-ground.

E. G. Brown *Undertaker.*

RETURN OF A DEATH.

To the Clerk of the Town in which the Death occurred.

1. Date of Death, . . .	October 19th 99
2. Name, ...	Thomas J. Perry
(Maiden Name),* .	—
(Name of Husband),*	—
3. Sex, and whether single,	Male
Married, or Widowed,	Married
4. Color,†	White
5. Age, ...	43 Years, 2 Months, 14 Days.
(Disease or Cause of Death, (Primary and Secondary),‡	
6. Duration of Sickness, .	
(By whom certified, .	Dr. Thos. Dixon
7. Residence, ...	Lunenburg
8. Occupation, ...	Farmer
9. Place of Death, . . .	135 Main St
10. Place of Birth, . . .	Lunenburg
11. Name of Father, . .	John Perry
12. Name of Mother, . . (Maiden Name),	Lucy Perry
13. Birthplace of Father, .	Ireland
14. Birthplace of Mother, .	Ireland
15. Place of Interment, .	Lunenburg
Signature of Undertaker or other person making the Return, ...	L. D. Cole

DATED at Winthrop, on Oct 20 1899

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

{Be very particular to fill all Blanks.}

Plate. Ed. May, 1893.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE OF THE CAUSE OF DEATH.

Boston, Oct. 19th 189 9

Name and age of deceased: Norman Perry Age 42 yrs. 2 mos. 14 dys.

Date and place of death: Oct. 19th 135 Shirley St. Winthrop

Disease or cause of death: Gunshot wound of chest. Probably accidental -

Duration of disease: *

I certify that the above is true, to the best of my knowledge and belief.

Name and residence of physician. Francis A Harris M.D.
Med. Examiner

* It is very desirable to be informed of the duration of the disease. When more than one cause of death is mentioned state the duration of each.

The office of the Board of Health will be open for the granting of permits for burial, as follows: — Saturdays, 9 A.M. till 1 P. M., except during the months of June,

PHYSICIAN'S CERTIFICATE OF THE CAUSE OF DEATH.

Boston, Oct 29 1899

Name and age of deceased: Arthur J Nunes Age 8 yrs. 2 mos. 27 dys.

Date and place of death: October 29th 1899 - Park Avenue Winthrop

Disease or cause of death: Spinal Meningitis

*Duration of disease:** Three weeks

I certify that the above is true, to the best of my knowledge and belief.

Name and residence of physician. Horace J Sowa M.D. Winthrop Mass

* It is very desirable to be informed of the duration of the disease. When more than one cause of death is mentioned state the duration of each.

The office of the Board of Health will be open for the granting of permits for burial, as follows: — Saturdays, 9 A.M. till 1 P. M., except during the months of June, July, August and September, when the office will be closed on Saturdays at 12 M.; Sundays, 10 A.M. till 12 M.; Holidays, from 10 A.M. till 12 M.; other days, from 9 A.M. till 5 P.M.

UNDERTAKER'S RETURN. ~~Boston.~~ Winthrop

Date of death, Oct 29 1899 Name, Arthur J Nunes

Maiden name,* Sex, M

~~Married~~, single, ~~or widow of~~ S ~~wife of~~.

Color, W Age, 8 years, 2 mos., 27 days. Residence, Winthrop

Place of death (street and number), Park Ave Winthrop Ward

Place of birth, Boston Occupation,

Name of father, Edw. J Maiden name of mother, Mary R Pachico

Birthplace of father, Lisbon Portugal Birthplace of mother, St George Western Islands

Place of interment,† Malden

*If a married woman or a widow. †Give the name of the burial-ground.

C. J. Murphy *Undertaker.*

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

November 5

Name and Age of Deceased,† John Cain Age, 84 Y. M. D. 5 days

Place and Date of Death,‡ died at Pleasant St Winthrop Mass 1899

Disease or Cause of Death,§ old age. Cardiac failure, Strangulated Hernia

Duration of sickness, 2 months.

I certify that the above is true to the best of my knowledge and belief.

Signature and Residence of Certifying Physician. { B H Metcalf M. D.
52 Winthrop St Winthrop Mass

Date of Certificate, Nov 7th 1899.

‡ Give also street and number, if any.
† Or sex of infant not named. If still-born, so state. ‡ If child died immediately after birth, so state.
§ If a Soldier or Sailor in the War of the Rebellion, give both Primary and Secondary Cause.

R

at

Date,

Filed,

The provisions of chapter 444 of the
oldest person next of kin present at the tim
which a death occurs, shall, within five days
the clerk of the city or town in which the d

The commanding officer of a vessel sh
or to the clerk of the city or town within th

Penalty for neglect to comply with th

A physician who has attended a pers
request, furnish for registration a certificate

Penalty for refusal or neglect, ten dol

Any person having charge of the funer
certificate made in accordance with section

RETURN OF A DEATH.

To the Clerk of the Town in which the Death occurred.

1. Date of Death, . . .	nov. 24th -/99.
2. Name, ...	Leo masters.
(Maiden Name),* .	
(Name of Husband),*	
3. Sex, and whether single, Married, or Widowed,	male & married
4. Color,†	
5. Age, ...	33 Years, ~ Months, ~ Days.
6. Disease or Cause of Death, (Primary and Secondary),‡ Duration of Sickness, By whom certified, .	
7. Residence, . . .	165 Shirley St. Winthrop
8. Occupation, ...	Ships steward. mass:
9. Place of Death, . . .	Winthrop. mass:
10. Place of Birth, .	L'pool. Eng:
11. Name of Father, . .	Ebenezer masters
12. Name of Mother, . . (Maiden Name),	
13. Birthplace of Father, .	warrington Eng.
14. Birthplace of Mother, .	winthrop. mass:
15. Place of Interment, .	
Signature of Undertaker ~~or other person~~ making the Return, . . .	Sumner Floyd

DATED at Winthrop, on Nov 25 1899

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. May, 1893.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

RETURN OF A DEATH.

To the Clerk of the Town in which the Death occurred.

1. Date of Death,	December 1st 1899
2. Name,	Mildred Helen Fowler
(Maiden Name),*	—
(Name of Husband),*	
3. Sex, and whether single,	Female
Married, or Widowed,	
4. Color,†	White
5. Age,	Years, 2½ Months, Days.
6. Disease or Cause of Death, (Primary and Secondary),‡	
Duration of Sickness,	
By whom certified,	
7. Residence,	Winthrop Mass
8. Occupation,	
9. Place of Death,	220 Shirley St
10. Place of Birth,	" " "
11. Name of Father,	Frank L. Fowler
12. Name of Mother, (Maiden Name),	Edith Blanche Carue
13. Birthplace of Father,	Boston Mass
14. Birthplace of Mother,	Holden Me
15. Place of Interment,	Pumping Depot Rd Point
Signature of Undertaker or other person making the Return,	Sumner Floyd

DATED at Winthrop, on Dec 1st 1899

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. May, 1893.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

*ame and Age of Deceased,** Mildred Helen Fowler Age, 2½ mos.

ate and Place of Death,† - died at Winthrop, Dec. 1st 1899,

'isease or Cause of Death, - of Pneumonia
(Primary and Secondary.)‡‡

'uration of Sickness, - - Nine days.

I certify that the above is true, to the best of my knowledge and belief.

nature and Residence of Certifying Physician, W. J. Porter, Winthrop.

Date of Certificate, Dec 1st 1899.

r Sex of Infant (not named). If stillborn so state. † If child died immediately after birth so state. ‡ If a soldier or sailor who served in the War of the Rebellion.

Plate. Ed. December, 1896.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

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RETURN OF A DEATH.

To the Clerk of the Town in which the Death occurred.

1. Date of Death,	December 5th 1899
2. Name,	John Henry Lovell
(Maiden Name),*	
(Name of Husband),*	
3. Sex, and whether single, Married, or Widowed,	Male Married White
4. Color,†	
5. Age,	67 Years, ~ Months, ~ Days.
6. Disease or Cause of Death, (Primary and Secondary),‡ Duration of Sickness, By whom certified,	
7. Residence,	Winthrop Mass
8. Occupation,	Wood Turner
9. Place of Death,	No 17 Dominick St
10. Place of Birth,	Province of N.S.
11. Name of Father,	William Lovell
12. Name of Mother, (Maiden Name),	Mary Lovell
13. Birthplace of Father,	Unknown
14. Birthplace of Mother,	Unknown
15. Place of Interment,	Cambridge Cemetery
Signature of Undertaker ~~or other person~~ making the Return,	Jeremiah Floyd

DATED at Winthrop, on Dec 5th 1899

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. May, 1893.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 26*

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

Name and Age of Deceased,† John H. Dowell Age, 67 Y. ~ M. ~ D.

Place and Date of Death,‡ died at Winthrop (Ironside) Dec 6th 1899

Disease or Cause of Death,§ Apoplexy

Duration of sickness, twenty four hours

I certify that the above is true to the best of my knowledge and belief.

Signature and Residence of Certifying Physician. Horace J. Soule M. D.
Winthrop Mass

Date of Certificate, Dec 8th 1899.

Give also street and number, if any.
† Or sex of infant not named. If still-born, so state. ‡ If child died immediately after birth, so state.
§ If a Soldier or Sailor in the War of the Rebellion, give both Primary and Secondary Cause.

R

at

Date,

Filed,

The provisions of chapter 444 of the
oldest person next of kin present at the time
which a death occurs, shall, within five days
the clerk of the city or town in which the d

The commanding officer of a vessel sh
or to the clerk of the city or town within th

Penalty for neglect to comply with th

A physician who has attended a pers
request, furnish for registration a certificate

Penalty for refusal or neglect, ten dol

Any person having charge of the funer
certificate made in accordance with section
health or to the clerk of the city or town in

RETURN OF A DEATH.

To the Clerk of the Town in which the Death occurred.

1. Date of Death,	Dec 1st 19th 1897
2. Name,	Adeline Ramsdell Wife
(Maiden Name),*	— Corgan
(Name of Husband),*	James A. H.
3. Sex, and whether single,	Female
Married, or Widowed,	Married
4. Color,†	
5. Age,	59 Years, — Months, — Days.
6. (Disease or Cause of Death, (Primary and Secondary),‡	
Duration of Sickness,	
By whom certified,	
7. Residence,	Milton Mills
8. Occupation,	
9. Place of Death,	4 Fourth Street
10. Place of Birth,	Dover Maine
11. Name of Father,	Richard Corgan
12. Name of Mother, (Maiden Name),	Barbara Gilpatrick
13. Birthplace of Father,	Dover Me
14. Birthplace of Mother,	Dover Me
15. Place of Interment,	Milton Mills
Signature of Undertaker or other person making the Return,	

Dated at ..... , on ..... 18 .

* If a Married Woman or Widow. ‡ If a Soldier who served in the War of the Rebellion.
† If other than White. (M.) Mulatto. (I.) Indian. If of other Races, specify what.

[Be very particular to fill all Blanks.]

Plate. Ed. May, 1893.—5,000.

[*Public Statutes, Chapter 32, as amended by Acts of 1888, Chapter 306; Acts of 1889, Chapter 224; Acts of 1893, Chapter 263.*]

SECTION 3. A physician who has attended a person during his last illness shall, when requested, forthwith furnish for registration, a certificate stating, to the best of his knowledge and belief, the name of the deceased, his age, the disease of which he died, the duration of his last sickness, and the date of his decease; and a physician who has attended at a birth of a child dying immediately thereafter, or at the birth of a stillborn child, shall, when requested, forthwith furnish for registration a certificate, stating to the best of his knowledge and belief the fact that such a child died after birth or was born dead. If a physician neglects or refuses to make a certificate as aforesaid, or makes a false statement therein, he shall be punished by a fine not exceeding fifty dollars. In case the deceased was a soldier or a sailor who served in the war of the rebellion, the physician shall give both the primary and the secondary or immediate cause of death as nearly as he can state the same. If a physician refuses or neglects to make such certificate he shall forfeit to the treasurer the sum of ten dollars for the use of the town in which he resides.

SECTION 5. No undertaker, sexton or other person shall bury in a city or town or remove therefrom a human body until he has received a permit so to do from the board of health or its duly appointed agent, or, if there is no board of health in such city or town, from the city or town clerk. No such permit shall be issued until there has been delivered to such board, or agent or clerk, as the case may be, a satisfactory written statement containing the facts required by this chapter to be returned and recorded, together with the certificate of the attending physician, if any, as required by section three of this chapter, or in lieu thereof a certificate as hereinafter provided. If there is no attending physician, or if the certificate of the attending physician cannot be obtained, for good and sufficient reasons, early enough for the purpose, the chairman of the board of health or any physician employed by a city or town for the purpose shall, upon request of said board, agent or clerk, make such certificate as is required of the attending physician; and in case of death by violence the medical examiner shall, if requested, make the same. When such satisfactory statement and certificate are delivered to the board of health or to its agent, the board or agent shall forthwith countersign and transmit the same to the clerk or registrar for registration. The person to whom the permit is so given shall thereafter furnish for registration any other information as to the deceased or to the manner and cause of the death, as the clerk or registrar may require. Any person violating any of the provisions of this section shall be punished by a fine not exceeding fifty dollars.

PHYSICIAN'S CERTIFICATE.

Name and Age of Deceased,† Adeline R. Gore Age, 69 Y. ~ M. ~ D.

Place and Date of Death,‡ died at Winthrop December 10" 1899

Disease or Cause of Death,§ Pneumonia Typhoid

Duration of sickness, twenty three days

I certify that the above is true to the best of my knowledge and belief.

Signature and Residence of Certifying Physician. Horace J. Soule M. D.
Winthrop

Date of Certificate, Dec 12th 1899.

Give also street and number, if any.
† Or sex of infant not named. If still-born, so state. ‡ If child died immediately after birth, so state.
§ If a Soldier or Sailor in the War of the Rebellion, give both Primary and Secondary Cause.

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The provisions of chapter 444 of tl
oldest person next of kin present at the ti
which a death occurs, shall, within five da
the clerk of the city or town in which the

The commanding officer of a vessel
or to the clerk of the city or town within

Penalty for neglect to comply with t

A physician who has attended a pe
request, furnish for registration a certificat

Penalty for refusal or neglect, ten d

Any person having charge of the fun
certificate made in accordance with section
health or to the clerk of the city or town

RETURN OF A DEATH.

To the Clerk of the City or Town in which the death occurred.

(FILL OUT WITH INK. ALL NAMES TO BE IN FULL.)

Name, Ora M W Dawes Sex, F Color, W

Date of Death, December 31 1899; Age, 29 Years, 8 Months, 22 Days.

Maiden Name, {If married, widowed or divorced.} Aitken

Husband's Name, William J. Dawes

Single, Married, Widowed or Divorced, Married Occupation, Housewife

*Residence, {~~If out of town, also state fully.~~} 49 Bowdoin Street

Place of Birth, Charlottetown P. E. Island

*Place of Death, 49 Bowdoin Street Winthrop

Name of Father, William F Aitken

Birthplace of Father, Anna Aitken

Maiden name of Mother, Unknown

Birthplace of Mother, Charlottetown P. E. Island

Place of Interment, (Give name of Cemetery), Temporary Deposit. Receiving Tomb

Dated at Winthrop

on January 1st 1900

Signature and place of business of Undertaker. Sumner Floyd

Winthrop Mass

No.

URN OF THE DEATH

OF

189 .

189 .

Acts of 1897 require that every householder in whose house a
of the death of any of his kindred, or the person in charge of
after the date of such a death, give notice thereof to the boar
ath occurred. (See section 6.)

ll give notice of the death of any person under his charge to th
Commonwealth at which his vessel first arrives after such death.
requirements of sections 6 and 7, five dollars. (See section 8
on during his last illness shall forthwith after the death of
setting forth the required facts. (See section 10.)

lars. (See section 11.)

eal rites preliminary to the interment of a human body shall obt
10, and return it, together with the facts required by section
which the death occurred.

PHYSICIAN'S CERTIFICATE.

Name and Age of Deceased,† Eva M Downes Age, 29 Y. 8 M. 22 D.

Place and Date of Death,‡ died at Hunitrop Mass ~~January 1899~~ December 31 1899

Disease or Cause of Death,§ Pneumonia

Duration of sickness, 6 Days

I certify that the above is true to the best of my knowledge and belief.

Signature and Residence of Certifying Physician. O. E. Johnson M. D.
Hunitrop Mass

Date of Certificate, January 2 1900

Give also street and number, if any.
† Or sex of infant not named. If still-born, so state. ‡ If child died immediately after birth, so state.
§ If a Soldier or Sailor in the War of the Rebellion, give both Primary and Secondary Cause.

at

Date

File

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